

RECOMMENDATION • INDIANA UNIVERSITY KELLEY SCHOOL OF BUSINESS • MBA PROGRAM
 801 W. Michigan St. • Indianapolis, IN 46202-5151 • 317-274-4895 • 317-274-2483 FAX

Applicants Name: _____
 (Please Print) (First) (M.I.) (Last)

The Family Educational Rights and Privacy Act of 1974 entitles students to have access to letters of recommendation that are part of the student's application and are retained in the files at Indiana University. The law also permits the applicant to sign a waiver relinquishing rights to inspect letters of recommendation.

The applicants signature below constitutes a waiver; no signature means that if the application is admitted and begins the program, the student has the right to inspect the recommendation.

If admitted to the MBA program, I waive my right to inspect the letter of recommendation below.

Signature _____ **Date** _____

The individual named above is applying for admission to the Indiana University Kelley School of Business MBA Program - Indianapolis and intends to have your letter of recommendation included in the information that is used for evaluation for admission. Please complete the information requested on both sides of this form. If the waiver above is not signed, the applicant, if admitted and enrolled, may have access to this recommendation.

Once you have completed this form, please **mail it directly to the Kelley School of Business-MBA Program, 801 W. Michigan St. #3024, Indianapolis, IN 46202-5151.** Indiana University is proud to have highly qualified women and men seek admission to the Kelley School of Business. Admission to the MBA program is selective. Your interest in this candidate and assistance in the admission process is greatly appreciated.

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

What is the population against which you are evaluating t his applicant? _____

	Below Average	Average	Above Average	Outstanding	Exceptional	Unknown
GENERAL ABILITY						
CREATIVITY						
INITIATIVE						
MATURITY						
JUDGMENT						
LEADERSHIP ABILITY						
ANALYTICAL SKILLS						
COMMUNICATION SKILLS						
TEAM PLAYER SKILLS						

City _____ State _____ Zip

Email _____