



Graduate Recommendation Form

Applicant's Name Last Name First Name Middle Name

Applicant's Address Address City State Zip Code

The above named applicant is applying for admission to DePaul University School of Music and is required to obtain recommendations from three persons with whom she/he is well acquainted. Your cooperation in preparing this reference form is appreciated and the information submitted will be confidential. After completing the form, please return it to DePaul School of Music, Admissions, 804 W. Belden Ave., Chicago, IL 60614.

1. How long have you known the applicant?

2. In what capacity?

3. Check one of the following: Superior Above Average Average Below Average No Knowledge

Intellectual Interest

Industry

Reliability

Maturity

Emotional Stability

4. Please check the following factors of musical ability

Talent: capacity for musical achievement

Accomplishment: as evidenced by progress definitely noted in her/his undergraduate study

Signature Date

Printed Name Address

(PLEASE MAKE COMMENTS ON THE REVERSE SIDE OR ATTACH A SEPARATE LETTER)