



Applicant: Please complete Part I of this form by providing the requested information and checking the appropriate waiver option. Give this form to the person from whom you are asking for a recommendation. Using the University of Hawaii Graduate Division's supplemental document upload site, generate a request for recommendation using your recommender's email address.

Recommender: Please complete Part II of this form and upload your recommendation letter and this form as one PDF to the University of Hawaii Graduate Division's supplemental document upload site by **December 15** using the link provided to you via email.

Part I: To Be Completed By Applicant

Name of Applicant:					Degree Sought (MA/PhD):		
Name & Title of Recommender:				Affiliation:			
Address:							
City:		State:		Country:		Zip Code:	

Mandatory: Check one of the following waiver options:

____ I hereby waive my right of access to this confidential evaluation of my application. I understand that the Department of History will hold this evaluation in confidence from me and from the public.

____ I **NOT** waive my right of access to this evaluation of my application, but I do authorize the evaluator to provide a candid evaluation of, and all information relevant to, my application.

Signature Date

Part II: To Be Completed By Recommender

Please assess the applicant's ability to do graduate study in history, to obtain the degree sought, and to lead discussion sections, grade papers, and counsel students in introductory history courses. Use the space below, the reverse side of this form, or a separate letter for your qualitative evaluations.

Applicant's Achievement and Ability Compared to Other Students	Superior (Top 10%)	Excellent (Top 20%)	Above Average	Average	Below Average	Unable to Judge
Knowledge of the field						
Ability to communicate						
Independence & responsibility						
Personal & professional maturity						
Academic and professional promise						

Qualitative Evaluation:

Signature Date