

UNIVERSITY OF WASHINGTON  
DIVISION OF SPANISH AND PORTUGUESE STUDIES  
RECOMMENDATION FORM  
CÁDIZ, SPAIN

Applicant Last Name

First Name

Middle

**To the Applicant:** Please give a copy of this form to the recommenders that you select, along with an envelope. Ask the recommenders to seal the letter, sign across the seal, and return it to you. Please do not open this envelope or break the seal. Submit the sealed envelope with your application.

The applicant has waived the right to see this recommendation:       yes       no

\_\_\_\_\_  
Signature of Applicant

**To the recommender:** This student is applying for admission to our program in CÁDIZ, SPAIN and has given your name as that of someone acquainted with his/her academic work. Please help us assess the applicant.

*We invite you to use the form below and to add on the reverse of this sheet a paragraph evaluating the applicant's strengths and weaknesses. Please also indicate how long and in what capacity you have known the applicant. Thank you for your assistance.*

Please rate the applicant's *demonstrated* qualities and performance, as well as potential, in comparison with others you have taught.

QUALITIES AND PERFORMANCE	Top 3%	Top 10%	Top 15%	Top 25%	OTHER (COMMENTS)
Intellectual Capacity					
Oral Mastery, Romance Language(s)					
Writing Skills, Romance Language(s)					
Reliability					
Collegiality					

\_\_\_\_\_  
Recommender's Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Recommender's Name (Printed)

Title: \_\_\_\_\_

\_\_\_\_\_  
Address of Institution

\_\_\_\_\_  
Email Address

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Please describe what personal qualities and intellectual capabilities the student possesses which would make him or her particularly successful in this program: