



LETTER OF RECOMMENDATION FORM

Directions: This form and accompanying Letter of Recommendation must be sent to the Admissions Office by the appropriate reference. Upon completion, please mail this form and letter to: **Studio Arts College International, 454 W 19th St, New York, NY, 10011** or scan and email to: **admissions@saci-florence.edu**. The applicant may mail this form and letter to the Admissions Office *only* if the envelope is sealed and signed by reference across the flap. The Admissions Office will not accept this document emailed or in unsealed envelopes from students and will verify the signature on the envelope; thus, the confidentiality of this recommendation is assured.

To Be Completed By Applicant:

Under the provisions of the Family Education and Privacy Rights Act of 1974, the applicant (if admitted and enrolled) will have access to the information provided below unless he/she has waived such access. You **must** answer the following question and sign your name before referring this form to the person you have listed as a reference.

Do you waive future access to this recommendation that you are requesting from the reference named below? You must specify one. I do. I do not.

NAME OF APPLICANT: _____ SIGNATURE OF APPLICANT: _____

To Be Completed By Reference:

PRINT NAME: _____ SIGNATURE: _____ DATE: _____

EMAIL: _____ PHONE: _____ FAX: _____

INSTITUTION: _____ DEPARTMENT: _____

ADDRESS: _____

How long have you known the applicant, and in what context? _____

What is your relationship to the applicant? (Must be academic or professional.) _____

Please describe the applicant's performance in relationship to that of others you have known at a comparable stage of development by placing an "X" in the appropriate space opposite each characteristic:

	Below Average	Average	Good (Above Average)	Very Good (Well Above Average)	Excellent (Top 10%)	Outstanding (Top 5%)	No Basis for Judgement
Academic knowledge in chosen field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical knowledge and skills in chosen field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to develop and implement new ideas / techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relating to and working with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to express self in writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to accept and give criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness in class discussion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discipline in work habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please attach this form to your written Letter of Recommendation and submit both documents to the SACI Admissions Office