



Recommendation for Admission

To the applicant: Please fill out the section below and give this form to the individual you are asking to write a letter of recommendation for your admission to the OGI School of Science & Engineering. At the time you give your recommender this form, you should take the opportunity to discuss your plans for graduate study.

Name of applicant: _____
Last/family name First/given name Middle name

Program applying for: _____
Degree Major

NOTE: All letters of recommendation will be shredded upon matriculation into a degree program at OGI.

To the recommender: On the back or on a separate page, please indicate the circumstances under which you have known the applicant, your opinion of the academic or professional performance of this applicant, and an assessment of the probable success of the applicant as a graduate student. This form and your letter of recommendation will be confidential and not shared with the applicant, so we encourage you to be candid.

Relative rating of Applicant: Please rank the applicant in relevance to his/her peers, and note the comparison group that you are using: (ex. undergraduate students, graduate students, specific age group, employees, other)

Top 1% Top 5% Top 10% Top 25% Other (please specify) _____ %

Comparison Group: _____

Name of recommender: (print) _____

Title/Employer: _____

Email address: _____

Signature: _____ Date: _____

Recommendation letters, accompanied by this form, must be signed and mailed directly from the author to the below address in a sealed, original envelope.

Return completed recommendation to:

OGI School of Science & Engineering
 Department of Graduate Education
 20000 NW Walker Rd.
 Beaverton, OR 97006

(503) 748-1027 / 1-800-685-2423
 FAX (503) 748-1285
 www.ogi.edu