Please provide this form to your referee and have him or her fill it out and return it directly to the nearest admissions office.

SECTION 1 (TO BE COMPLETED BY THE APPLICANT):

Applicant Information (please print or type)
Last Name: ___________________ First Name: ____________________ Middle Initial: _____

By giving this form to a referee, I am aware that under the Congressional Family Educational Rights and Privacy Act of 1974 [Sec. 438(a)(20)(B)c(c)], I am not required to, but that I voluntarily waive my right to access to confidential letters and statements of recommendation submitted to International University of Leadership in support of my application to the university. I further understand that under the provisions of the Family Education Rights and Privacy Act, an unsuccessful applicant, regardless of whether such applicant has signed a waiver, has no right to inspect any of the admission application materials accumulated in his/her file. The giving of a waiver shall not be regarded as a condition for admission to the university.

I hereby: ☐ do ☐ do not waive my rights of access to any and all letters or statements of recommendation which may be submitted by ______________________________ (Applicant must specify the name of person submitting recommendation) in connection with my application to International University of Leadership.

Signature of Applicant: _______________________________ Date: ____________________

SECTION 2 (TO BE COMPLETED BY THE REFEREE):

On behalf of the Office of Admissions, thank you for taking time to participate in the student recommendation process.

1. How long have you known the Applicant named above? __________________________

2. What is your relationship with the Applicant?
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
3. How do you rate the Applicant on the following criteria?
(Please check the appropriate boxes)

<table>
<thead>
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<th>Very Good</th>
<th>Good</th>
<th>Average</th>
<th>Unsatisfactory</th>
<th>Unobserved</th>
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</thead>
<tbody>
<tr>
<td>Competence in his/her field</td>
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<tr>
<td>Integrity</td>
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<td>Motivation</td>
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<td>Commitment to the task at hand</td>
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<td>Innovative ability</td>
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<td>Ability to work in a team</td>
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<td>Verbal skills in English</td>
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<td>Written communication skills in English</td>
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</table>

Additional Comments:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Name of the person who completed this form: ____________________________________________
Position/Title: ___________________________________________________________________
Organization: ____________________________________________________________________
Address: _________________________________________________________________________
Telephone number: __________________________ E-mail: ________________________________
Signature: ________________________________ Date: _________________________________