

# Recommendation Form

## Executive MBA (Healthcare and Life Sciences)

To be completed by a senior executive in your organization who is familiar with your work.



Please print or type.

### To Be Completed by Applicant Before Submitting to Evaluator

I understand that all recommendations are confidential and not accessible to me.

Applicant's Name \_\_\_\_\_  
First Middle Last

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applying for Admission  Fall 20\_\_\_\_  Spring 20\_\_\_\_

The Silberman College of Business of Fairleigh Dickinson University offers an Executive MBA Program designed to enable professionals to earn their MBA in 21 months through Saturday and select Friday classes.

You have been asked to complete a recommendation for the above-named candidate, using this form (or a separate letter, if you prefer). It is school policy that all evaluations are confidential and not shared with applicants. Please note that your recommendation is considered a critical element in the application process. Return your comments in the envelope provided, first sealing and then signing the envelope flap in the area noted.

### Evaluator Information

Name \_\_\_\_\_ Position/Title \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Country/Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

How long have you known the applicant? (please give dates) \_\_\_\_\_

Under what circumstances have you known the applicant? \_\_\_\_\_

\_\_\_\_\_

1. Please comment on the applicant's demonstrated and/or potential managerial and leadership abilities. \_\_\_\_\_

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2. What do you consider to be the applicant's most outstanding talents or characteristics? \_\_\_\_\_

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3. What are the applicant's chief liabilities or areas for improvement? \_\_\_\_\_

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4. Do you agree with this statement: The applicant has the academic preparation and professional ability needed to complete an Executive MBA program.  Strongly agree  Agree  Agree with reservations  Do not agree

5. How would you rate this applicant in the following areas:

	Excellent	Above Average	Fair	Below Average
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical/Math Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Meet Deadlines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound Judgement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Presentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Are there any additional comments you would like to make concerning this candidate? \_\_\_\_\_

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this form in the envelope provided, making certain to also sign the sealed flap. Questions should be directed to:**

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Telephone: 201-692-7229 • E-mail: caligup@fdu.edu