Master of Arts in Psychology Program
California State University, Bakersfield

Applicant: _____
Last Name First Name Middle

Students are given the right to inspect letters of recommendation. We believe that in some cases letters written in confidence are more useful. We invite you, therefore, to sign the following waiver. You may, however, expressly decline to do so without prejudice to your application. Please check one of the two statements below, sign below, and give the form to your referee.

- ❑ I waive any rights I have to access this form and letter of recommendation.
- ❑ I do not agree to the above waiver.

Applicant's Signature: _____ Date: _____

Application Deadline: April 1

To the Referee:

This applicant has applied to a Master of Arts program that emphasizes both research and teaching skills for career development in Psychology. Please complete this form and **provide a letter of recommendation** on your letterhead or the back of this form. Your letter has significant weight in our decision-making. Please tell us the frame of reference you are using (e.g., compared to psychology undergraduates, master's students, etc.) and include:

- How long, in what capacity, and how well you have known the applicant.
- Your judgment of the applicant's understanding of psychological theory, writing and oral skills, and capacity to carry out an empirical thesis.
- Your frank assessment of the applicant's interest in and enthusiasm for psychology, and commitment to graduate work in psychology.
- Any special considerations about the candidate that we should know about in evaluating academic transcripts and test scores.

Name and Position: _____

Address: _____

Signature: _____ Date: _____

Please put this completed form and letter of recommendation in the envelope the applicant has provided, seal it, write your name across the seal, and return it to the applicant. Incomplete applications jeopardize timely processing.

Thank you for your help in evaluating this candidate.