



College of Creative Arts; School of Music
PO Box 6111, Morgantown, WV 26506

Confidential Recommendation Form for Undergraduate Programs in the WVU School of Music

To be completed by the applicant:

Confidential Recommendation for: _____
Applicant's Last Name *First Name* *Middle Initial*

_____ I waive my right to have access to this recommendation (the student *may not* see this recommendation).

_____ I do not waive my right to have access to this recommendation (the student *may* see this recommendation).

_____ _____
Applicant's Signature *Date*

Major Instrument: _____

Degree Program:

- Music Education Music Performance Music Composition
- Jazz Performance BA In Music Music Minor – Major Field of Study _____

To The Recommender: Please complete this form, seal and sign the envelope flap, return to applicant to be mailed together with other application materials.

The applicant's request for admission cannot receive final action until this recommendation has been returned; please note the due dates listed above for the receipt of forms. The University values your candid evaluation of the applicant and assures you that your comments will be treated in a strictly confidential manner unless the student does not waive the right to access.

Part I - Please complete the following sections:

How long have you known the student and in what context?

How would you describe this student?

