Recommendation Form

Doctor of Management in Community College Policy and Administration

Instructions for the Applicant:

Recommendations must be from individuals who are able to assess your professional or academic and suitability for doctoral study in community college policy and administration. Personal recomm are not acceptable for the application. The recommendation must be signed by the evaluator. Elec signatures are accepted. Once the evaluator has completed the recommendation, they must subm to UMGC <u>atcmissions@umgc.edu</u>

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In accordance with the Family Educational Rights and Privacy Act (FERPA), a student, upon reques review completed recommendation forms and attached recommendation statements that are provulversity, unless the student has waived the right to inspect such documents in advance. Complete the section below. Your right to review these recommendation records is considered waived if you complete this section.

Please check:	I DO	I DO NOT	waive my right of access to this document.
	100	I DO NOT	waive my right of access to this accument.

Applicant's Signature:	Data	
Δ nniicant s Nonati ire	Date.	
	Date.	

Instructions for the Evaluator:

Upon completion, please submit this form directly to UMGC vianeimaions@umgc.edBlease includ