Department of Economics and Finance  
University of New Orleans  
Confidential Evaluation Form

To the Applicant  Please print or type your name  Family Name  First Name  Middle Name

Pursuant to the Family Educational Rights and Privacy Act of 1974, applicants to the graduate programs at the University of New Orleans may either waive or reserve their rights to see this confidential evaluation after it has been completed. Please indicate your choice below before submitting this form to be completed.

☐ I waive the right to see this evaluation form after it has been completed.  
☐ I reserve the right to see this evaluation form after it has been completed.

Signature  Date

In compliance with Section 504 of the Rehabilitation Act of 1973, those providing letters of recommendation are asked not to refer directly or indirectly to the applicant’s handicap or physical disability.

To the Person Completing this Evaluation

The person whose name appears above is applying for admission to graduate studies in the Department of Economics and Finance at UNO. Your assessment of this applicant will be very helpful to the Admissions Committee who will place particular emphasis on your comments. The committee requests that you be as specific and candid as possible, citing any particular attributes of the student that will either positively or negatively reflect on the student’s ability to be a successful student in our program. Since the application for admission will not be considered until this form has been received, we hope you will be able to give it your prompt attention.

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<th>Superior Top 5%</th>
<th>Excellent Top 10%</th>
<th>Good Top 25%</th>
<th>Average Top 50%</th>
<th>Poor Bottom 50%</th>
<th>No basis for judgement</th>
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<td>Intellectual ability</td>
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<td>Motivation</td>
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<td>Ability in oral expression</td>
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<td>Ability in written expression</td>
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Please attach a separate page on your letterhead describing how well and in what capacity you have known the applicant. Evaluate the applicant in as many of the following areas as possible: intellectual ability; motivation; interpersonal skills; oral and writing skills; quantitative skills; maturity; integrity; imagination and creativity; overall strengths and weaknesses.

Signature  Date

Your Full Name  Position/Title

Address  Work  Telephone (______)

Indicate your basis for comparison.

☐ All students I have known  
☐ Graduating seniors  
☐ The students in the class of which the applicant was a member  
☐ Employees I have supervised or with whom I have worked  
☐ Other (Please specify)  

Please mail this form to:  
Graduate Coordinator  
Department of Economics and Finance  
University of New Orleans  
New Orleans, LA 70148