

**University of North Texas  
Master of Science in Learning Technologies  
Request for Reference**

At least two recommendations are required with each application. These recommendations must address the applicant's abilities and potential for comprehending graduate-level materials, engaging in analytical and critical thinking, writing at a graduate level, and using technology to complete course-related projects. Please use the attached recommendation form when requesting these letters.

Recommendation forms may be submitted via email ([LT-MS-References@unt.edu](mailto:LT-MS-References@unt.edu) (preferred), fax (940-565-4194), or postal mail:

University of North Texas  
College of Information  
Department of Learning Technologies  
3940 N Elm, G150  
Denton, TX 76207

**PART I: APPLICANT:**

Please complete the first part of the recommendation form. If submitting the completed form electronically, sign this form and forward a digital copy of the form to each reference for completion. The recommender may send this form, along with any other materials form to:

[LT-MS-References@unt.edu](mailto:LT-MS-References@unt.edu)

If submitting a hard copy, give this form plus a stamped, self-addressed envelope to each reference if you want them to send the recommendation letters under separate cover. If you want your letters to accompany your packet, please ask your referee to seal the envelope and sign across the back flap.

Applicant's Name \_\_\_\_\_ is applying to the master's degree in Learning Technologies (check one: \_\_\_ traditional format or \_\_\_ AOP format) in the College of Information at the University of North Texas. This degree consists of courses in the application of technology to learning and training situations.

\_\_\_ I do \_\_\_ I do not waive access to this letter under the Family Educational Rights and Privacy Act of 1974, or any other law, regulation, or policy.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*It is the policy of the University of North Texas and the College of Information, Department of Learning Technologies not to discriminate on the basis of race, color, religion, sex, age, national origin, disability, or disabled veteran or veteran of the Vietnam Era status in their educational programs, activities, admissions, or employment policies. Questions or complaints should be directed to the Equal Opportunity Office, (940) 565-2456. TDD access is available through Relay Texas at 1-800-735-2989.*

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**PART II: RECOMMENDER:**

You may either send this form digitally to [LT-MS-References@unt.edu](mailto:LT-MS-References@unt.edu) , mail this form directly to us, or return the letter to the applicant in a sealed envelope with your signature across the back flap. This form is considered part of the student's application materials and is required before action can be taken with regard to the student's applicant status. Any information you provide is protected by the 1974 Family Educational Rights and Privacy Act (FERPA).

Recommender's Name: \_\_\_\_\_

Recommender's Title: \_\_\_\_\_

Recommender's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

1. I have known the applicant for \_\_\_\_\_ years, \_\_\_\_\_ months.

2. I know the applicant:  not at all  slightly  fairly well  very well

3. I have known the applicant (check all that apply):

In an educational setting:

Undergraduate Student

Graduate Student

Advisee

Teaching Assistant

Other

In a work setting:

Colleague

Employee

Supervisor

Other

4. If you have known the applicant as a student, how many of your classes has the applicant taken?

none  one  two or more

5. Indicate the population with which the applicant is being compared in this recommendation:

Undergraduate students whom I have taught or known.

Graduate students whom I have taught or known.

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6. Is the applicant's academic potential greater or less than that indicated by his/her grades (to the best of your knowledge)? Mark where appropriate on the scale below:

Much Less	Somewhat Less	Equal	Somewhat Greater	Much Greater		No basis for Judgment

7. Compared to the population indicated in Item 5, rate this applicant on each characteristic:

Characteristic	Upper 5%	Upper 10%	Upper 25%	Upper 50%	Lower 50%	No basis for Judgment
Emotional maturity						
Ability to work with others						
Leadership skills/qualities						
Professional judgment						
Flexibility and adaptability						
Creativity						
Open-mindedness						
Tolerance for ambiguity						
Intellectual curiosity						
Writing ability						
Speaking ability						
Initiative						
Problem-solving ability						
Self-regulating ability						
Professional commitment						
Potential as a graduate student						

8. Recommendation (check one):

- I recommend the applicant without reservation.
- I recommend the applicant with reservation (please explain in Item 9)
- I do not recommend the applicant.

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9. In the space provided below, please describe (a) how well you know the applicant and in what capacity and (b) how you would compare the applicant in intellectual ability, motivation, work habits and academic promise to other students/employees. Please comment on the candidate's strongest/weakest characteristics and any other information you consider relevant. If you prefer, you may submit a formal reference letter along with this form.