



This section is to be filled in by applicant. (Please print or type.)

| Last Name | First Name | MI | Department | Degree Sought |
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OPTIONAL: (This waiver is not required as a condition for admission to or receipt of financial aid or any other services and benefits from the college.) All rights of access to this letter of recommendation conferred by the Family Educational Rights and Privacy Act of 1974

- Estimate of the applicant's potential and motivation as a student and promise of professional success
- Applicant's skills and qualifications including any strengths and weaknesses
- Extent of your acquaintance with the applicant
- If possible, compare applicant with any others in the same field who have done work at NMCC
- If applicable, rate their academic ability

Please have the individual completing the recommendation letter return directly to: