

The  
University  
Of Texas  
At Dallas

# PROJECT MANAGEMENT PROGRAM

## EVALUATION FORM

### To the Applicant:

Please complete the top of this form and submit it to the evaluating individual

Name of Applicant \_\_\_\_\_

I  waive  do not waive my right of access to the completed evaluation under the Family Education Rights and Privacy Act of 1974.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### To the Evaluator:

The person named above is applying to the Project Management Program offered by The University of Texas at Dallas. Your evaluation of the applicant is extremely important in the evaluation process, and the School of Management greatly appreciates the time you are taking to complete this evaluation. Please mail the completed form directly to:

The Executive Programs Office  
School of Management, SM 10  
The University of Texas at Dallas  
P. O. Box 830688  
Richardson, Texas 75083-0688

Telephone: (972) 883-2652  
Fax: (972) 883-6381  
EMail: jamesj@utdallas.edu

Please provide comments that you feel would be helpful to the Admissions Committee in determining the applicant's qualifications for successful completion of a demanding graduate program and the applicant's potential future role in senior management. (If you prefer, you may submit a separate statement on your stationery.)

How long and in what capacity you have known the applicant \_\_\_\_\_

\_\_\_\_\_

What you consider are the applicant's outstanding talents or strengths \_\_\_\_\_

\_\_\_\_\_

Areas in which the applicant could improve \_\_\_\_\_

\_\_\_\_\_

NOTE THIS IS A TWO PAGE EVALUATION FORM. PLEASE COMPLETE BOTH PAGES. 6/17/98  
Page 1 of 2

Using the chart below, please evaluate the applicant relative to others you have known in a similar capacity.

	Outstanding (Top 10%)	Good (Top 25%)	Average (Middle 50%)	Below Average (Bottom 25%)	Not Observed
Intellectual ability					
Maturity					
Leadership potential					
Self-confidence					
Ability to work with others					
Analytical ability					
Motivation					
Perseverance					
Creativity and imagination					
Verbal communication skills					
Written communication skills					

Briefly describe the group against which you are measuring the applicant's abilities

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Please use the space below to make any additional comments concerning this applicant, particularly his/her aptitude for graduate work and a career in senior management.

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Overall rating of applicant:  Strongly recommend  Recommend with reservations  Do not recommend

Name \_\_\_\_\_  
Please type or print

Signature \_\_\_\_\_

Title \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_  
Number and Street (or P.O. Box)

\_\_\_\_\_  
City State Zip Code Phone