MBA Program: Graduate Assistantship Letter of Recommendation

Phone 575.646.8003 Fax 575.646.7977 http://business.nmsu.edu/academics/graduate-programs/mba College of Business, New Mexico State University Guthrie Hall Room 114 Las Cruces, NM

GA Application Deadline

First consideration will be given based on deadlines of:

Fall Semester: March 15.Spring Semester: October 15.

NOTE!

Students are responsible for ensuring that letters of recommendation are received prior to the deadline date.

Eligibility

- Admission to the MBA program as a "REGULAR" graduate student.
- Continuing graduate students must have a graduate GPA of 3.00 or higher.
- International students may be required by the NMSU Graduate School to have additional screening.

Conditions

Graduate assistants:

- Work 10 to 20 hours per week.
- Must maintain enrollment in a minimum of 9 graded graduate credits per semester.
- Must maintain a GPA of 3.0 or better.
- With assistantships must be available from the first day faculty report for the semester through the deadline for submitted final grades. (See NMSU's Academic Calendar at http://academiccalendar.nmsu.edu for specific dates.)

Stipends

Salary information is provided in the Graduate Assistants Salary Table at http://hr.nmsu.edu/employment/salary.

Tuition

Full-time or half-time assistants are considered to be New Mexico residents, for tuition purposes, during the first year of their assistantships. If New Mexico resident status has not been established prior to reappointment, the graduate assistant may be subject to non-resident tuition rates.

Application Procedure

- 1. A completed application form, three letters of recommendation, and a résumé are required. Application and recommendation forms are available in the MBA Program Office, Guthrie Hall Room 114 and online at http://business.nmsu.edu/academics/graduate-programs/mba/assistance.
 - a. Keep a copy of the application for your records.
 - b. Resubmit your application each year to ensure consideration for future semesters.
- 2. Students are responsible for ensuring that letters of recommendation are received prior to the deadline date.

Letter of Recommendation: Page 1 of 2

Application Deadlines

First consideration will be given based on deadlines of:

Fall Semester: March 15 Spring Semester: October 15

MBA Program, College of Business Guthrie Hall Room 114, MSC 3GSP New Mexico State University

Las Cruces, NM 88003-8001 FAX 575.646.7977; Office 575.646.8003

FOR OFFICE USE ONLY
STATUS
GRGPA /Hrs
GMAT

MBA Program: Graduate Assistantship Letter of Recommendation

Applicant Instructions

- Print or xerox three copies of this 2-page Letter of Recommendation form (one 2-page Letter of Recommendation form for each of the three evaluators who will recommend you to the program).

educational background and abilities.	opriate person who is familiar with your							
Full Name of Applicant								
Under the Federal law entitled the Family Educational Rights and Privacy Act of 1974, regis their records, including letters of recommendation. Opinion is divided whether letters open t student's potential than those which are not.								
Should you wish to waive your right to access this evaluation, you may do so by signing the waiver below. In any case, all evaluations will be carefully considered.								
I expressly waive any rights I might have to access this recommendation under the Family Educational Rights and Privacy Act of 1974, or any other law, regulation or policy. I understand that NMSU does not require me to execute this waiver and is willing to review my application whether or not I sign it.								
Applicant signature	Date							

Evaluator Instructions

As required by the Family Educational Rights and Privacy Act of 1974, a student may either elect to waive or not to waive the privilege of viewing this recommendation form.

If the student has not signed the above waiver, you should consider this form to be non-confidential.

Please fill out the information on the next page for your recommendation.

2. Return this page and your completed Letter of Recommendation page(s) to: Fax: 575.646.7977 or mail to: MBA Program, College of Business Guthrie Hall Room 114, MSC 3GSP New Mexico State University

Physical address for UPS, FedEx, etc.: Guthrie Hall Room 114 1325 International Mall

Las Cruces, NM 88003-8001

Phone: 575.646.8003

			Lett	er of Red	commen	dation: P	age 2 of 2		
ء ا	etter of Recommendation for:								
LC	Applicant's Last Name	e, First Name	, Middle Initia	al					
	e student is applying for an assistantship in the MBA Progran y; it will not become part of the student's permanent academ		ion you pr	ovide will	be used	for this pu	ırpose		
	e are particularly interested in the ability of the applicant to: Po ching assistant, serve in a professional capacity in the chose		uate study	, perform	research	n, serve a	s a		
1.	We are interested in the general character of the applicant. In comparison with other graduate students you have known, rate the following items by a numeric score of 1 to 5, basing your ratings on the level of accomplishment you have come to expect of the applicant.								
		Top 10% 1	Superior 2	Above Average 3	Average 4	Below Average 5	Inadequate knowledge to rate X		
Α.	Intellectual ability								
B.	Adequacy of ability for research								
C. D.	Emotional maturity and stability Motivation and drive								
E.	Ability in written expression								
F.	Scholarship								
G.	Self-reliance and independence								
Н.	Ability in oral expression								
I.	Mastery of fundamental knowledge in his/her general field								
	applicant's qualifications as rated above. For non-U.S. citize duties.	ens: Please	e indicate d	degree of	English μ	proficienc	y teaching		
3.	How far do you think this applicant will progress? (Check on Will probably complete the master's degree. Is not likely to complete a graduate degree without excess Is not likely to complete any graduate degree.								
l ha	ave been acquainted with this applicant during the period of	(date)		to	(date)				
as									
	(instructor, advisor, supervisor or other)								
Na	me			Phone N	Number _				

Date

Institution/Company _____

Evaluator Signature