



*B*OWER SCHOOL OF MUSIC
Letter of Recommendation Form

Part A: to be completed by the applicant.

Full Name _____
 Address _____
 City _____ County _____ State _____ Zip _____
 Home Phone _____ Cell Phone _____ E-mail _____
 Instrument or Voice type _____
 Signature _____ Date _____

Part B: to be completed by the person writing the reference (or attach a letter of reference):

Please indicate where the applicant would rank among students currently or recently in your area.	Top 5%	Top 10%	Top 25%	Top 50%	Lower 50%	No Info
Level of performing accomplishments						
Musical interpretative ability						
Intellectual ability						
Personal integrity/cooperation/reliability						
Relative maturity (musical or otherwise)						
Potential for success and/or motivation in applicant's chosen field						

Part C: to be completed by the person writing the reference (or attach a letter of reference):

In what capacity do you know the applicant _____ and how long? _____

In the space below, please write any additional comments about this applicant (attach a separate page if necessary).

Name (please print) _____
 Signature _____ Date _____
 Present Position _____ Institution _____
 Phone _____ E-mail _____

Please return completed form to:

**Bower School of Music
 Florida Gulf Coast University
 10501 FGCU Boulevard South
 Fort Myers, FL 33965-6565**