



UNIVERSITY  
OF  
SAINT MARY  
OF THE LAKE

School of Parish Leadership & Evangelization

1000 E. Maple Ave., Mundelein, IL 60060-1174

847-970-4924

[admissions@usml.edu](mailto:admissions@usml.edu)

## Recommendation Form for Graduate Programs in SPLE

### To the applicant:

Please complete the information below and give this form to your recommender.

Name: \_\_\_\_\_  
                    Title            First                            Middle                            Last

In accordance with the provisions of the Family Educational Rights and Privacy Act of 1974, enrolled students have the right to see their recommendations unless they explicitly waive that right.

\_\_\_\_\_ I waive my right of access to this recommendation.

\_\_\_\_\_ I do not waive my right of access to this recommendation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### To the Recommender:

Please review and complete this form and the questions on the opposite side of this page.

We appreciate your candid assessment of the candidate's capacities and motivation for ministry performance and post-graduate study. Please return this form directly to [admissions@usml.edu](mailto:admissions@usml.edu)

Name: \_\_\_\_\_

Position: \_\_\_\_\_ Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Work phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

### Please check one option:

\_\_\_\_\_ I recommend    \_\_\_ I recommend with reservation    \_\_\_\_\_ I do not recommend this applicant for admission

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

