INFORMATION TO BE PROVIDED BY THE APPLICANT:

Applicant’s Name: ________________________________________________

Degree Program: ________________________________________________

Recommender’s Name: ____________________________________________

Relationship to the Applicant: _____________________________________

Recommendation for: ________ Dissertation Scholarship ________ Thesis Scholarship

WAIVER

I acknowledge by my signature that I hereby waive any right or privilege to inspect or challenge the contents and comments expressed herein, and such observations as are included in letters of recommendations shall remain confidential between the writer, the Dean for Graduate Studies, and appropriately authorized Selection Committee Members.

Date: ________________ Applicant’s signature: _________________________

Please attach on a separate sheet(s) your assessment of the academic and professional accomplishments and potential of the applicant letters should be at least one page and no more than three pages in length). When the form has been completed, please sign on the signature line below and send the form directly to the Office of Graduate Studies at graduate@unomaha.edu, subject line: Dissertation or Thesis Scholarship. The deadline for receipt of the completed recommendation can be found at http://www.unomaha.edu/graduate-studies/financing-your-degree/scholarships.php.

Date: ____________________ Recommender’s signature: ___________________

SEND TO:

graduate@unomaha.edu

Subject line: Dissertation or Thesis Scholarship