



**Industrial
Biotechnological
Institute**

Professional Recommendation

P. O. Box 362259. San Juan, Puerto Rico 00936-2259
www.ibipr.com

Telephone: 787-410-9194/619-5059 gadmission@ibipr.com
www.biotechcenters.com

Student Identification

For IBI Office Use: ID # _____

Please fill out this section.

Student's Name _____ Last 4 digits of SS# _____

Last _____ First _____ Middle _____

Street/P.O. Box _____

City _____ State _____ Zip _____

Telephone _____ E-mail _____

Student Signature _____ Date _____

Recommendation

The above named student is applying to Industrial Biotechnological Institute's. Your candid assessment of the individual's professional performance and personal qualities will be of significant value to the Admission Committee. Please complete and return this form as quickly as possible. Thank you!

Please describe the applicant in the following areas:

	<i>Outstanding (top 5%)</i>	<i>Above</i>	<i>Above</i>	<i>Below Average</i>	How long have you known the Applicant?
Intellectual Ability					In what context?
Creativity					
Intellectual Curiosity					What academic, civic, or professional honors has the student received?
Leadership					
Self- Discipline					
Dependability					
Maturity					
Concern for Graduate Studies					
How do you perceive the applicant's:					
Influence on Others					
Readiness for Graduate school					

For admission to Industrial Biotechnological Institute, this student is recommended:

() With Enthusiasm () Strongly () Fairly Strongly () With Reservation () Not Recommended

Print Name _____ Position/Title _____

Business/Organization _____ Telephone () _____

Street/P.O. Box City _____ State _____ Zip _____

Signature _____ Date: _____

Thank you for your assistance. Please return the completed recommendation to Industrial Biotechnological Institute. For mailing, fold this form along the dotted lines and tape closed.