

Please complete and return to:
CAREER SERVICES
EASTERN ILLINOIS UNIVERSITY
600 Lincoln Ave., Charleston, IL 61920
Ph: (217) 581-2412

Candidate's Name _____
(Last) (First) (Middle) (Maiden Name, If Applicable) (ID Number)

Instructions to Candidate: We will accept only original letters (not copies). As a courtesy you should supply a stamped envelope which is addressed to Career Services to all off-campus authors of recommendations. This letter of recommendation is an official student record and is protected as property of Eastern Illinois University.

Note to Author of Recommendation: This form is to be prepared using a computer. (You also have the option of attaching a signed letter printed on your own letterhead to this form.) Please make a concise statement about the candidate covering such qualities as scholarship, natural ability, sense of responsibility, ability to express thoughts clearly, judgement, interpersonal skills, etc. Please mail statement directly to Career Services at the address listed above. References **MUST** have your signature.

Evaluation By: Professor _____ Employer _____ Other _____ Date _____

Signature of Author _____ Print/Type Name _____

Title _____ School or Firm _____

Professional Address _____

Phone # _____ E-mail Address _____