

Graduate Studies | Keene State College  
229 Main Street | Keene, NH 03435-2605  
603-358-2290 | Fax: 603-358-2569  
gradstudies@keene.edu | keene.edu/gradstudies

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**DIRECTIONS FOR APPLICANT**

Please complete the APPLICANT INFORMATION section below and submit it to two different professional references. A professional reference may include college or university professors, employers or supervisors, and professional colleagues. Members of your family and friends are not considered to be professional references.

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**APPLICANT INFORMATION**

Name of applicant \_\_\_\_\_

Street, city, state, zip \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

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**DIRECTIONS FOR REFERENCE**

1. Please complete the REFERENCE INFORMATION section at the bottom of this page.
2. Please attach a letter of recommendation assessing the applicant's academic strengths, weaknesses and potential as a graduate student.
3. Return the completed Recommendation Form to:  
Keene State College, Graduate Admissions, 229 Main St., Keene, NH 03435-2605

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

\_\_\_\_\_

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**REFERENCE INFORMATION**

Name of recommender \_\_\_\_\_

Job title/Academic rank \_\_\_\_\_

Employer/Academic institution \_\_\_\_\_

Street, city, state, zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Recommender's signature \_\_\_\_\_ Date \_\_\_\_\_