## DEPT. OF COMMUNICATION STUDIES, CONCORDIA UNIVERSITY - ACADEMIC ASSESSMENT FORM

Please complete this academic assessment form on behalf of the applicant. Email to **ugradcoms@concordia.ca** by March 1st. The time and care you give to this form is appreciated. Referees are advised that amendments to Quebec's Access to Information Act (Law 65) permit students to have access to references about themselves once a decision has been taken and, as such, these references are not confidential.

Signature	Da	Date				
Institution			Phone			
Name		Tit	tle			
9. Comments						
8. Overall evaluation of student	OEXCELLENT	O VERY GOOD	O GOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
7. Likelihood of completing program	OEXCELLENT	O VERY GOOD	O GOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
6. Respect for deadlines	OEXCELLENT	O VERY GOOD	OGOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
5. Intellectual curiosity	OEXCELLENT	OVERY GOOD	O GOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
4. Ability to work in groups	OEXCELLENT	OVERY GOOD	O GOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
3. Analytical/interpretive skills	OEXCELLENT	O VERY GOOD	OGOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
2. Creative ability	OEXCELLENT	OVERY GOOD	O GOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
1. Writing ability	OEXCELLENT	O VERY GOOD	OGOOD	OAVERAGE	O BELOW AVERAGE	OUNKNOWN
How would you evaluate the applicant	in the followin	ig areas?				
What course(s) did you teach this ap	oplicant?					
In what capacity have you known th	is applicant? _					
How long have you known this appl	icant?					
Name of applicant						