

**Educational Leadership**  
Doctoral Program      *for teaching & learning (Ed.D)*

**Letter of Recommendation**

**Instructions for the Applicant:** Please request a recommendation from two individuals who know you well and can provide an overview of your achievements, scholarship, ambition, relationships, and abilities. **Note:** This recommendation should be completed by someone in a leadership role within a pre-school through grade 12 educational setting.

**Instructions for the Writer of the Recommendation:** The person whose name appears below is applying for admission to the Educational Leadership for Teaching and Learning Doctoral Program at Lewis University. Please complete the attached form and return in the self-addressed and stamped envelope provided by the applicant.

Please complete this form and mail to:    Lewis University  
Office of Graduate and Adult Admission  
Unit 1213  
One University Parkway  
Romeoville, IL 60446-2200

Questions regarding the completion of this form may be addressed to the Office of Graduate and Adult Admission by e-mail at [edd@lewisu.edu](mailto:edd@lewisu.edu) or by phone at (815) 836-5610.

**To be completed by the applicant:**

Name of Applicant	
Street Address	
City, State, Zip Code	
Telephone Number	
E-Mail	

I voluntarily waive my rights of access to this recommendation under Public Law 93-380, so that it may be kept confidential. I further understand that this confidential recommendation will be used for the sole purpose of considering my application to the Lewis University Educational Leadership for Teaching and Learning Doctoral Program.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
(photocopied signature not acceptable)

