



**LETTER OF RECOMMENDATION FOR ADMISSION**  
MASTER OF SCIENCE IN RISK MANAGEMENT AND INSURANCE

Applicant Name: \_\_\_\_\_

Email: \_\_\_\_\_

I authorize the recommender to disclose information for the exclusive purposes of complying with the provisions of the admission requirements.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Referrer information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Workplace: \_\_\_\_\_

\_\_\_\_\_

Position: \_\_\_\_\_

Phone: \_\_\_\_\_

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

In what capacity, do you know them? \_\_\_\_\_

Signature: \_\_\_\_\_

Fecha: \_\_\_\_\_

**INSTRUCTIONS FOR THE PERSON THAT RECOMMENDS THE APPLICANT**

Please provide an evaluation of the applicant taking into consideration the elements mentioned below:

Characteristics	Excepcional	Superior	Average	Below Average	No opinion
Professional attitude					
Critical thinking					
Spanish written skills					
Spanish verbal skills					
English written skills					
English verbal skills					
Aptitude for graduate studies					
Capable to carry out research projects					
Goal oriented					
Creativity or originality					
Intellectual curiosity					
Ability to work in a group setting					
Initiative					
Leadership skills					
Responsible					
Ability to work in a group setting					

**Please send to:**

Universidad Universal  
PO BOX 70345  
San Juan PR 00936-834