**OKLAHOMA BANKERS ASSOCIATION**

**SUMMER INTERN PROGRAM**

**LETTER OF RECOMMENDATION**

**OKLAHOMA STATE UNIVERSITY**

(Please type)

Last Name of Applicant First Middle

Through the Family Educational Rights and Privacy Act of 1974, students are allowed full access to their permanent record file. Students also may waive their rights to review letters of recommendation or evaluation. If you wish to waive your right to access to this letter, please sign below. This action is completely optional.

Signature of Applicant Date

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TO THE INDIVIDUAL COMPLETING THIS FORM:

Please answer the questions below in as specific and candid manner as possible. Your comments will be an important factor in the selection decision. We realize this requires time and effort on your part and we appreciate your assistance. Thank you.

Please mail or e-mail to arrive in my office by **5:00 p.m., February 11, 2014**:

Mr. Gary Cottongim

Spears School of Business

Oklahoma State University

332A Business Building

Stillwater, OK 74078

FAX: 405-744-5180

gary.cottongim@okstate.edu

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How long have you known the applicant and in what capacity?

What do you consider the applicant's most outstanding talents or characteristics?

Please discuss your perception of the applicant's potential in a professional environment particularly with regard to interpersonal skills.

Please provide any further comments you feel would aid in evaluation of the applicant.

Please give us your appraisal of the applicant in terms of the qualities listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Outstanding | Superior | Good | Average | Poor |
| LeadershipPotential |  |  |  |  |  |
| Motivation |  |  |  |  |  |
| Maturity |  |  |  |  |  |
| Ability to work with others |  |  |  |  |  |
| Verbal Skills |  |  |  |  |  |
| WritingSkills |  |  |  |  |  |

I strongly recommend

 recommend

 recommend with some reservations

 do not recommend

Name (Please Print):

Signature: Date:

Affiliation or Company: