

## Evaluation Form Master Program in Management (M.Sc.)

Name of Applicant

Name of Evaluator

To the applicant:

If you believe that additional evaluations beyond the two required will provide the Admissions Committee with additional useful information please forward this template to other evaluators too (please use maximal four recommendations).

The Admissions Committee will review your application when all required documents are received unless you notify us in writing to wait for supplemental materials.

To the evaluator:

The above-mentioned person is applying for admission to the HHL Leipzig Graduate School of Management.

The Admissions Committee asks for your cooperation in the self-managed application process in which the applicant is responsible to submit so-called recommendation letters. The evaluation of the candidate is extremely valuable in terms of his/her performance and motivation.

Please complete this form and send it back to the Admissions Office either via e-mail to Miriam Wilke ([m.wilke@hhl.de](mailto:m.wilke@hhl.de), full-time M.Sc.) and/or Dorothee Fleischer ([dorothee.fleischer@hhl.de](mailto:dorothee.fleischer@hhl.de), part-time M.Sc.) or send the signed document via mail to the following address:

HHL gGmbH  
Jahnallee 59  
04109 Leipzig  
Germany

Alternatively you could also return the evaluation form in a sealed envelope to the applicant.

Thanks for your cooperation.  
M.Sc. Admissions Committee

**Please note that the provided space for your answers is limited.**

1. How long have you known the applicant?

2. In what capacity?

3. What do you consider the applicant's outstanding talents?

4. In which areas could the applicant exhibit growth or improvement?

Please comment on the applicant's capacity for graduate study in business and on his or her potential for a successful management career (if you prefer you may answer this question in a separate letter).

Please use this scale to rate the applicant as compared to his or her peers.

	Exceptional Top 2%	Outstanding Top 10%	Good Top 1/3	Average Middle 1/3	Poor Bottom 1/3	Unable to judge
Analytical ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intelligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I strongly recommend

I recommend

I do not recommend this applicant for admission to HHL Leipzig Graduate School of Management

Name

Position/Title

Organization

Address



Date

Signature of Evaluator

Telephone number/ e-mail address

**Please be aware that we need your signature. You can either use your scanned signature or print the filled out document, sign it, scan it and send it to the respective contact.**

**Thank you very much for your support!**