

# Recommendation Letter



## APPLICANT INFORMATION (TO BE FILLED OUT BY APPLICANT)

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

Applicant Email Address: \_\_\_\_\_

## RECOMMENDER INFORMATION (TO BE FILLED OUT BY RECOMMENDER)

Prefix: \_\_\_\_\_

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

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

Organization: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_



For **undergraduate applicants**, please attach letter of recommendation to this cover sheet and return to:

**Office of Undergraduate Admissions**  
Duquesne University  
600 Forbes Avenue  
Pittsburgh PA, 15282

or e-mail to [recommendations@duq.edu](mailto:recommendations@duq.edu).

For applicants to **graduate programs**, please return this form, along with your letter of recommendation, to:

**Office of Graduate Admissions**  
1M Libermann Hall  
600 Forbes Avenue  
Pittsburgh, PA 15282