Abstract
The purpose of this paper is designed to provide a deeper understanding of the role of word of mouth (WOM). The data collected by questionnaires that were completed by 120 students of four Institutes of Foreign Languages in Tehran, Iran. Its reliability computes with Cronbach’s alpha test. Data analysis techniques using exploratory factor analysis, structural equation modeling was performed to test the hypothesis. The purpose of this study was examined the impact of affective commitment and high- sacrifice commitment variables on the formation of WOM among students. Through empirical analysis of this study showed that this variable had significant effect on WOM. The relationships examined have not been investigated previously in an educational context and the results suggest educational managers need to understand them as they play crucial roles in determining WOM, which plays a significant role in determining students’ educational preferences. If processes and strategies can be developed that improve an educational way, satisfaction, commitment. Finally, the findings of this study showed that affective commitment had a significant effect on the word of mouth.

Keywords: Word of mouth (WOM), Commitment, Confidence, Social benefits, Special treatment.

Introduction
Most recent WOM research has been conducted from a customer to customer perspective, even though WOM is found in an educational context. Repeatedly, research has shown the importance of consumer WOM in the formation of attitudes (Bone, 1995); Scholars agree that WOM is especially critical for the success of assistance providers (Berry and Parasuraman, 1991). However, while the relevance of WOM is widely accepted. At its core, WOM is a process of influence (Merton, 1968). WOM is informal, person-to-person communication about a brand, product, organization or service that occurs between a non-commercial sender and a receiver (Harrison-Walker, 2001). In fact, This form of communication seems to have a greater influence on people’s choices than do other forms of communication (Murray, 1991; Day, 1971) and is becoming increasingly popular as people are becoming less attentive to traditional promotional forms (Rotfeld, 2006; Webb et al., 1998). The links between these constructs suggested WOM formation may be more complex than had been previously suggested. Consequently, the current study followed the approach taken by some researchers (e.g. Cronin et al., 2000; Spreng and Mackoy, 1996) by modeling interrelationships between the antecedent constructs so a more comprehensive WOM model could be examined. The focus of this research is on investigating as WOM a central construct in the development of customer commitment. Managers must be aware of the antecedents to WOM in order to communication customer. This research examines the effects of relationship Confidences, Social, Special treatment benefits and commitment, word of mouth. This research extends past literature by simultaneously testing the effect of relationship variables. Our findings provide insights into how WOM can create customer commitment. Moreover, our findings underscore the critical role WOM plays in determining commitment to the educational context. While

The Definition of WOM
WOM is generally seen as the informal transfer of positive or negative purchase and consumption-related behavior between consumers (So¨derlund and Rosengren, 2007). Researchers have to determine the context in which WOM is to be examined because the relationship between WOM and its antecedents is not linear. WOM tends to occur when people are either satisfied or dissatisfied (Davidow and Leigh, 1998). From a practical standpoint, managers are more interested in promoting positive WOM. Consequently, the current study examined positive WOM. Also, Stern (1994) defined WOM by drawing on its distinctiveness from advertising. She wrote that ‘WOM differs

The Theoretical framework and hypotheses
Despite what we know about WOM, important researches do in this area remain. This paper investigates the relationship between Confidences, Social, Special treatment benefits and commitment, word of mouth. At present, research supports this subject.

the effect of WOM on is commitment well known, the studies have specifically focused on investigating the WOM antecedents that drive commitment. Through an analysis of data from an in four Institutes of Foreign Languages, this research extends prior do not work by examining the impact of relationship benefits and relationship maintenance on commitment and ultimately the effect of commitment on WOM.

The Theoretical framework and hypotheses
Despite what we know about WOM, important researches do in this area remain. This paper investigates the relationship between Confidences, Social, Special treatment benefits and commitment, word of mouth. At present, research supports this subject.
be brand, product or service focused. It may be organization focused. Neither in this electronic age need WOM be face to face, direct, oral or ephemeral. There is some evidence that virtual WOM through electronic bulletin boards functions analogously to face-to-face WOM.

Relational benefits (confidence; social, special treatment.)
Relational benefits are defined as those benefits customers receive from long-term relationships above and beyond the core service performance (Gwinner et al., 1998). Specifically, Gwinner et al. (1998) suggest that these benefits are a result of engaging in long-term relational exchanges with service firms and can be categorized into three distinct benefit types: Confidence, Social and special treatment.

Confidence benefits
Confidence benefits refer to perceptions of reduced anxiety and increased comfort in knowing what to expect from service encounters (Gwinner et al., 1998). They represent customers' desires for relationship stability and confidence in core service provision (Patterson and Smith, 2001). Customers that perceive high confidence benefits are likely to have a feeling of security and comfort in having developed a relationship (Gwinner et al., 1998), thus reducing anxiety and increasing confidence in the service provider’s ability to deliver on its promises. Confidence benefits diminish risk and enhance knowledge of the service expectations (Kinard and Capella, 2006). Furthermore, confidence benefits increase relationship efficiency through decreased transaction costs that in turn, can foster customer commitment (Hennig-Thurau et al., 2002).

Social benefits
Social benefits refer to the benefits received from actual relationships with service firms. As customer employee interactions are central to the customer’s quality perception in many services (Reynolds and Beatty, 1999), it is understandable that social benefits are an important consideration to the customer provider relationship. In the present study, we define social benefits as the benefits customers receive from the emotional aspect of relationships, such as personal recognition, familiarity and friendships (Gwinner et al., 1998). Social benefits that arise from having established a relationship with a service provider will facilitate the development of rapport and provide customers with a service based social friendship that may enhance the customer’s service experience (Bittner, 1995). Service relationships facilitate experience and openness, which assists in mutual understanding and ultimately commitment. Research suggests the social bonding that occurs in service relationships is likely to increase customer dependence on the service provider (Bendapudi and Berry, 1997). The association, friendship and personal recognition that accompany social benefits add value to the customer’s experience, which provides motivation to maintain the relationship and remain committed to that firm.

Special treatment benefits
Special treatment benefits are the most tangible of the benefits customers receive from service firms. Special treatment benefits pertain to benefits such as price breaks, faster service or individual service for customers with an established relationship (Gwinner et al., 1998). Special treatment benefits, for example, may take the form of customization such as tailored service or economic aspects including monetary savings. Customers forego relationships with other service providers with the expectation of receiving special treatment when needed (Patterson and Smith, 2001).

Commitment
Commitment which is the extent to which a person wishes to maintain a continuing relationship with a firm or a brand (Sunderland and Rosengren, 2007; Uncles and Dowling, 2003), has become an important focus for many organizations in recent years. There seems to be two forms of commitment, one that is emotional and one that is economic (Evanschitzky et al., 2006). Drawing on Meyer and Allen’s (1996) workplace suggestions, researchers have labeled the first as affective commitment and the second as calculative commitment (Evanschitzky et al., 2006). Affective commitment is person’s emotional attachment to a brand or organization, which is based on a person’s identification with that brand or organization and is built through trust and creating an emotional connection (Evanschitzky et al., 2006). In contrast, calculative commitment, which Meyer and Allen (1996) termed continuance commitment, is an intention to continue a relationship because switching costs are high or because there are a lack of suitable alternatives (Bendapudi and Berry, 1997; Meyer and Allen, 1996). Drawing on Meyer and Allen’s (1996) research, Harrison-Walker (2001) suggested a two-dimensional customer commitment scale, with affective commitment and high sacrifice commitment components, which was used in the present study.

Hypotheses
Perceived relational benefits and customer commitment
The establishment of a good business relationship must reflect mutual benefits for both a firm and a customer. The relationship benefits that customers receive from a firm should add value to their service experience beyond that provided by the core product (Zineldin, 2006). It has been suggested that firms will commit themselves to establishing, developing, and maintaining relationships with partners who provide substantial benefits (Morgan and Hunt, 1994). Similarly, Hennig-Thurau et al. (2002) found that relationship benefits are directly related to the level of commitment the customer may feel towards the service firm. Specifically, relationship benefits consist of confidence benefits, social benefits and special treatment benefits (Gwinner et al., 1998), and in the present study, these are proposed as antecedents to commitment. Confidence benefits refer to perceptions of reduced anxiety and increased comfort in knowing what to expect from service encounters (Gwinner et al., 1998). They represent customers’ desires for relationship stability and confidence in core service provision (Patterson and Smith, 2001). Customers that perceive high confidence benefits are likely to have a feeling of security and comfort in having developed a relationship (Gwinner et al., 1998), thus reducing anxiety and increasing confidence in the service provider’s ability to deliver on its promises. Confidence benefits diminish
risk and enhance knowledge of the service expectations (Kinard and Capella, 2006). Furthermore, confidence benefits increase relationship efficiency through decreased transaction costs that in turn, can foster customer commitment (Hennig-Thurau et al., 2002). Confidence benefits are positively linked to likelihood to continue a relationship (Gwinner et al., 1998), which can be considered to reflect commitment. In fact, Hennig-Thurau et al. (2002) found a significant positive relationship between confidence benefits and commitment. We therefore propose that:

**H1.** Confidence benefits positively affect affective commitment.

Social benefits refer to the benefits received from actual relationships with service firms. As customer employee interactions are central to the customer’s quality perception in many services (Reynolds and Beatty, 1999), it is understandable that social benefits are an important consideration to the customer-provider relationship. In the present study, we define social benefits as the benefits customers receive from the emotional aspect of relationships, such as personal recognition, familiarity and friendships (Gwinner et al., 1998). Social benefits that arise from having established a relationship with a service provider will facilitate the development of rapport and provide customers with a service-based social friendship that may enhance the customer’s service experience (Bitner, 1995). Service relationships facilitate experience and openness, which assists in mutual understanding and ultimately commitment. Research suggests the social bonding that occurs in service relationships is likely to increase customer dependence on the service provider (Bendapudi and Berry, 1997). The association, friendship and personal recognition that accompany social benefits add value to the customer’s experience, which provides motivation to maintain the relationship and remain committed to the firm. The reciprocity principle explains that people naturally return favors (Gouldner, 1960). In other words, people give back to those who have given to them in order to avoid feelings of guilt that may occur if the person merely receives benefits and gives nothing back (Gouldner, 1960; Li and Dant, 1997). So, according to the reciprocity principle, social benefits that a customer may receive would act as an element of reinforcement which then commits the customers to the relationship. In fact, several studies have suggested a positive relationship between social benefits and relationship commitment (Goodwin, 1996; Goodwin and Gremler, 1996; Hennig-Thurau et al., 2002). Goodwin and Gremler (1996), for example, found that people who perceive communal feelings, such as a friendship, are more willing to make an effort to maintain a relationship and are more committed as a result. We therefore propose that:

**H2.** Social benefits positively affect high-sacrifice commitment.

Special treatment benefits are the most tangible of the benefits customers receive from service firms. Special treatment benefits pertain to benefits such as price breaks, faster service or individual service for customers with an established relationship (Gwinner et al., 1998). Special treatment benefits, for example, may take the form of customization such as tailored service or economic aspects including monetary savings. Customers forgo relationships with other service providers with the expectation of receiving special treatment when needed (Patterson and Smith, 2001). Social exchange theory posits that relationships are formed via a subjective cost-benefit analysis and a comparison of alternatives (Vaughn and Hogg, 2002). This theory helps explain the consumer-service provider relationship in that customers will only engage in a relationship where the perceived benefits outweigh any perceived costs. Also according to the reciprocity principle, on receiving special treatment, customers feel compelled to reciprocate, which fosters relationship commitment. In other words, customers with high perceived special treatment benefits from a firm feel increased emotional and/or cognitive switching barriers and are ultimately more committed to the firm. We thus hypothesize that:

**H5.** Special treatment benefits positively affect sacrifice commitment.

**H6.** Special treatment benefits positively affect High-sacrifice commitment.

WOM is generally seen as the informal transfer of positive or negative purchase and consumption-related behavior between consumers (Sunderland and Rosengren, 2007). Researchers have to determine the context in which WOM is to be examined because the relationship between WOM and its antecedents is not linear. WOM tends to occur when people are either satisfied or dissatisfied (Davidow and Leigh, 1998). From a practical standpoint, managers are more interested in promoting positive WOM. Consequently, the current study examined positive WOM. The measurement of the WOM construct is a challenge as there is a lack of consensus as to how WOM should be viewed and, consequently, measured. Some researchers have focused on information spread, resulting in volume and dispersion being examined (e.g. Godes and Mayzlin, 2004). Others have focused on explicit recommendations (e.g. Fullerton and Taylor, 2002; Gremler and Brown, 1999) or on WOM as thought sharing about experiences (e.g. Wirtz and Chew, 2002; File et al., 1994). While commitment has been examined as an antecedent to various outcomes, only three studies have examined its direct impact on positive WOM. Bettencourt (1997) found commitment had a positive impact on WOM, as did Harrison-Walker (2001).

**H7.** The greater the level of affective commitment, the greater WOM.

**H8.** The greater the level of high-sacrifice commitment, the greater WOM.

The model implied by the various hypothesized relationships is shown in Figure 1. The model, which has six latent constructs and eight hypothesized relationships, was examined in the present study, which is discussed in subsequent sections.

**Conceptual model**

Based on the literature and the hypotheses formed, a model as shown in figure 1 has been developed for the study.
Methodology

This research has been conducted in order to find out the impact of relational benefits, commitment on the role of the WOM. For this purpose, information was collected by survey method. But in terms of data analysis the hypothesis are descriptive and correlational. Measuring instruments and scales are devices which researcher obtain and record the information. In this research some actions were doing for validity which are summarized as follows: First, many studies were taken through reading books, paper until concepts and important variables completely are used and measuring would be clear by this chance proper questions for hypothesis are designed. Questionnaires according standard model was design and theoretical models were provided. So, its validity has been approved. The purpose of the reliability is if this research will be tested on the situation and by other researchers have similar result. Therefore, validity and reliability can be interpreted to accuracy and reliability, and determine measuring tools how can the concept of the adaptation measured. Cronbach’s alpha coefficients were calculated for all items of each construct. Results indicated that all the scales were considered to be reliable. Cronbach’s alpha for constructs are: WOM: 0.89, Affective Commitment: 0.83, High-sacrifice Commitment: 0.72, Special treatment: 0.80, Social benefits: 0.77, Confidence benefits: 0.71. So, the questionnaire reliability is acceptable. The conceptual model is given above. We have tried to propose from the model that to measure the effects of the variables, in the research was used the 26-items questionnaire construct with a five point Likert-type scales (ranging from 1 strongly disagree, 5 strongly agree). For determining validity, the study uses structural equation modeling to examine the hypotheses of the survey and the implementation is executed AMOS18 software package.

![Figure 1: Conceptual Model]

The Statistical shape is:

\[
\begin{align*}
P\text{-Value (Sig)} & > \alpha = 0.05 \Rightarrow H_0 \text{ accept} \\
P\text{-Value (Sig)} & \leq \alpha = 0.05 \Rightarrow H_1 \text{ accept}
\end{align*}
\]

$H_0$: the dependent variable distribution is following the normal distribution.

$H_1$: the dependent variable distribution is not following the normal distribution.

We therefore may examine the hypotheses based on the results of SEM implementation.

**Table 1: Fit Indices of Models**

<table>
<thead>
<tr>
<th>Model fit Indices</th>
<th>Recommended Value*</th>
<th>Structural Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chi-square to degree of freedom ratio CMIN/df)</td>
<td>3.00 or below</td>
<td>1.452</td>
</tr>
<tr>
<td>Goodness of fit index (GFI)</td>
<td>0.900 or above</td>
<td>0.93</td>
</tr>
<tr>
<td>Comparative fit index (CFI)</td>
<td>0.900 or above</td>
<td>0.93</td>
</tr>
<tr>
<td>(RMR)</td>
<td>0.900 or above</td>
<td>0.90</td>
</tr>
<tr>
<td>Root mean square of error approximate (RMSEA)</td>
<td>0.070 or below</td>
<td>0.69</td>
</tr>
</tbody>
</table>

Notes: Coefficient significant at p≤0.05.
The Sample
In this research, data were collected across students enrolled in four Institutes of Foreign Languages in Tehran, Iran. The data collected by questionnaires that were completed by 120 students and it was conducted over a two week period on each weekday. The data collections were conducted over a two-week period on each weekday. The questionnaire included two sections. The first section of the consisted of questions asking about variables (26 Items). The second part of the demographic information questions asking about their gender, age, education level and income. Also, The Bootstrap distribution is use to Moderating the non-normality of the variables. The below chart, show that has been confirmed the 1000 of sample.

Table2: The Measure Index

<table>
<thead>
<tr>
<th>variables</th>
<th>Number of Items</th>
<th>scales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidence Benefits</td>
<td>4</td>
<td>Gwinner et al. (1998) and Reynolds and Beatty (1999).</td>
</tr>
<tr>
<td>Special Treatment</td>
<td>5</td>
<td>Gwinner et al. (1998) and Reynolds and Beatty (1999).</td>
</tr>
<tr>
<td>Affective Commitment</td>
<td>4</td>
<td>Hennig-Thurau et al. (2002) and Smith (1998).</td>
</tr>
<tr>
<td>High-sacrifice Commitment</td>
<td>3</td>
<td>Hennig-Thurau et al. (2002) and Smith (1998).</td>
</tr>
<tr>
<td>High-sacrifice Commitment</td>
<td>3</td>
<td>Hennig-Thurau et al. (2002) and Smith (1998).</td>
</tr>
<tr>
<td>WOM</td>
<td>3</td>
<td>Price and Arnould (1999)</td>
</tr>
</tbody>
</table>

Discussion and conclusion
In this section, we present details of our findings on testing various hypotheses based on SEM implementation shown in Fig 2, 3. The structural model was tested following the hypothesized relationships described. First, we analyzed good fit indices that the structural equation model indices also indicate a good fit to the data (see Table 3). Second, as the results suggested the proposed model, which is shown in Figure 2, 3 was reasonable; each of the suggested hypotheses was examined.

H1: there is a significant, positive relation between Confidence and affective commitment. Table 3 results show that to increase Confidence and increase affective commitment. H0 is not accept significant at less of 0/001. Therefore H1is accept.

H2: there is not a significant, positive relation between Confidence and high-sacrifice commitment. Table 3 results shows that to decrease Confidence and decrease high-sacrifice commitment. H0 is accept significant at less of 0/001. Therefore H1is not accept.

H3: there is not a significant, positive relation between Social and affective commitment. Table 3 results show that to decrease Social and decrease affective commitment. H0 is accept significant at less of 0/05 level. Therefore H1is not accept.

H4: there is not a significant, positive relation between Social and high-sacrifice commitment. Table 3 results show that to increase Social and decrease high-sacrifice commitment. H0 is not accept significant at less of 0/05 level. Therefore H1is not accept.

H5: there is not a significant, positive relation between Special treatment and affective commitment. Table 3 results show that to increase Special treatment and decrease affective commitment. H0 is not accept significant at less of 0/05 level. Therefore H1is not accept.

H6: there is a significant, positive relation between Special treatment and high-sacrifice commitment.
commitment. Table 3 results show that to increase Special treatment and increase high-sacrifice commitment, $H_0$ is not accept significant at less of 0.001. Therefore $H_1$ is accept.

H7: there is a significant, positive relation between affective commitment and WOM. Table 3 results show that to increase affective commitment and increase WOM. $H_0$ is not accept significant at less of 0.001. Therefore $H_1$ is accept.

H8: there is a significant, positive relation between high-sacrifice commitment and WOM. Table 3 results show that to increase high-sacrifice commitment and increase WOM. $H_0$ is not accept significant at less of 0.001. Therefore $H_1$ is accept.

(See Table 3).
Table 3: the summary of Results of hypothesis testing

<table>
<thead>
<tr>
<th>Hypothesized relationship and sign</th>
<th>Estimate</th>
<th>T-value</th>
<th>conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidence → Affective Commitment</td>
<td>.585</td>
<td>4.740</td>
<td>supported</td>
</tr>
<tr>
<td>Social → Affective Commitment</td>
<td>.528</td>
<td>3.230</td>
<td>supported</td>
</tr>
<tr>
<td>Special treatment → Affective Commitment</td>
<td>-.114</td>
<td>-.867</td>
<td>not supported</td>
</tr>
<tr>
<td>Confidence → High-sacrifice Commitment</td>
<td>.118</td>
<td>.825</td>
<td>not supported</td>
</tr>
<tr>
<td>Social → High-sacrifice Commitment</td>
<td>-.222</td>
<td>-1.377</td>
<td>not supported</td>
</tr>
<tr>
<td>Special treatment → High-sacrifice Commitment</td>
<td>.423</td>
<td>2.711</td>
<td>supported</td>
</tr>
<tr>
<td>Affective Commitment → WOM</td>
<td>.763</td>
<td>6.554</td>
<td>supported</td>
</tr>
<tr>
<td>High-sacrifice Commitment → WOM</td>
<td>.068</td>
<td>.678</td>
<td>not supported</td>
</tr>
<tr>
<td>High-sacrifice Commitment → Affective Commitment</td>
<td>.304</td>
<td>2.701</td>
<td>supported</td>
</tr>
</tbody>
</table>

Table 3 shows the correlations between variables. On the basis of this the above hypothesis has been formulated (P<0.01, P<0.05).

Conclusion
The results obtained were consistent of studies which showed that WOM impacts on variables. As expected, we found strong association between WOM and commitment customer. This finding adds support to prior studies. The present study has limitations. Therefore, caution is advised with respect to the results. Also, findings should be considered as sector and context specific. This work brings additional insight into the nature of expected relational benefits and WOM. Future research may benefit from an examination of the differences between context types. Having a better understanding of WOM formation helps institution managers focus on the “right” antecedents, which are WOM, Relational benefits, High-sacrifice and affective commitment. The results also suggest broader responsibilities for such managers. If their goal is to increase customer satisfaction, in which WOM plays an important role, the management of helping customer is crucial and should be seen as a marketing tool, as well as an administrative process. To this end, assistance providers can implement strategies aimed at improving the confidence, social and special treatment benefits the customer receives. It is hoped that the ideas which are presented here may good and suitable.

References
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