



Faculty Recommendation Form

for Study Abroad / Study Tour

To be completed by the student

Name: _____

L number: _____

Overseas program: _____

Semester of program: Fall _____ Spring _____ Summer _____ Spring break _____

I understand that with my signature below, I waived my right to read this letter.

Signature: _____ *typing your name serves as your signature of approval.

To be completed by the evaluator

The above-mentioned student is applying for a Study Tour or study abroad program. We would appreciate your candid assessment of the applicant's attributes with which you are familiar.

- How long and in what capacity have you known the applicant?
- Please rate the applicant's academic attributes. You are welcome to elaborate below in question 4.

	Excellent	Good	Middlin'	Not good	Unsure
Competence in major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic interest and motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for working independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Please evaluate the applicant's suitability for the program. You are welcome to elaborate below.

	Excellent	Good	Middlin'	Not good	Unsure
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open-mindedness	<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"/>

- If you were the resident director of this overseas program, would you be eager, willing, reluctant, or resistant to have this applicant participate. Please be completely candid!

Signature: _____

Date: _____

Name: _____

Department: _____