

Professional/Academic Recommendation Form

Name of Student (applicant) _____

Name/Title/Affiliation of person submitting recommendation: _____

E-mail of person submitting recommendation: _____

Phone number of person submitting recommendation: _____

Context and length of time for which you have known the applicant _____

Rate applicant on a scale of 1-5 (5 highest):

	5	4	3	2	1	no information / not relevant
Intelligence						
Intellectual curiosity						
Scientific aptitude						
Research potential						
Creativity						
Personal Initiative						
Team work						
Motivation						
Work Ethic						
Reliability						
Independence						
Perseverance						
People skills						

Other Comments – please add any information that you feel might be useful in our evaluating the appropriateness of the applicant for a summer research internship position: