### SHORT-TERM STUDY ABROAD CHECKLIST

Letters of Recommendation Using the forms at the end of this application, obtain two recommendations from faculty members familiar with your academic work.			
Recommender #1:			
Transcripts Your application must be accompanied by copies of all transcripts for academic credits completed or attempted beyond secondary level. Unofficial transcripts are acceptable. Official transcripts may be obtained at the Office of the Registrar.			
Statement of Interest Please submit a typewritten statement (750 words) indicating your academic goals in applying for the program, your qualifications, and the specific course of study you would like to achieve.			

### RECOMMENDATION FOR STUDY ABROAD

# **To Be Completed by Applicant:**

Program Name		
Applicant's Name		
Last	First	Middle
I waive my right to review this	letter of recomme	endation.
I do not waive my right to revie	ew this letter of re	commendation.
Signature of Applicant		Date
To Be Completed by Faculty Recommend	er:	
1. I have known this applicant as a(n)		undergraduate student graduate student other
2. I have served as the applicant's		adviser
		teacher employer other
-	the applicant with	checking the box which most nearly represent n a representative group of students who have
0 – no basis for judgm 1 – below average 2 – average	4	– good – excellent – outstanding
1 self-reliance and independence	e;	
2 emotional stability and maturi	ty;	
3. flexibility and adaptability in	unfamiliar enviroi	nment

4. Please comment briefly on the applicant's academic	e performance.	
RECOMMENDATION:		
I recommend without reservation as an excellent pro	ospect.	
I recommend this applicant with some reservation.		
I cannot recommend the applicant.		
If you did not check the first box, please explain.		
Recommender's Name	Telephone	
Position/Title		
Institution or Organization		
Address		
Signature	Date	
3.5	Duc	
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Please place this form in a business envelope with the applicant's name and your name on the front. Please seal the envelope and write your signature across the seal. Give the envelope to the applicant to return with his/her completed application packet.

#### RECOMMENDATION FOR STUDY ABROAD

# To Be Completed by Applicant:

Applicant's Name	First	Middle
I waive my right to review this	letter of recomme	ndation
I do not waive my right to revie		
I do not waive my right to revie	w this letter of rec	commendation.
Signature of Applicant		Date
Го Be Completed by Faculty Recommend	er:	
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2. I have served as the applicant's		adviser
		teacher
		employer other
<u> </u>	the applicant with	checking the box which most nearly represent a representative group of students who have as the applicant.
0 – no basis for judgm	ent 3-	- good
1 – below average		- excellent
2 – average	3 -	– outstanding
self-reliance and independence	٠.	
2 emotional stability and maturi		
3 flexibility and adaptability in u		nment

4. Please comment briefly on the applicant's academic performance.					
DECOMMENDATION.					
RECOMMENDATION:	wooma at				
I recommend without reservation as an excellent pro-	-				
I recommend this applicant with some reservation.					
I cannot recommend the applicant.					
If you did not check the first box, please explain.					
Recommender's Name	Telephone				
Position/Title					
Institution or Organization					
Address					
Signature	Date				

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