

SDNI REU Letter of Recommendation

Applicants: fill out only the Applicant Information section, then print and give to your recommender to complete the Respondent Information section and return.

Applicant Information:

Last/Family Name

First Name

Middle Initial

University: _____

Before giving this form to recommender, please check one of the boxes and sign this statement:

I hereby waive my rights of access to this letter.

I do not waive my rights of access to this letter.

I authorize the preparation of a confidential evaluation and understand that the material will be kept confidential.

Signature: _____ Date: _____

Respondent/Recommender Information:

The applicant has applied for a summer Research Experience for Undergraduate (REU) program with SDNI, an NSF funded program.

Please rate the applicant by checking the appropriate box which best represents your opinion of the applicant in comparison with a representative group of individuals you have known with similar education and experience.

Please email the completed form to:

dosanchez+sdni@eng.ucsd.edu

with subject title: REU LOR for (student first and last name)

OR

Fax to:

858-822-1839

Date: _____

Recommender Name: _____

Position: _____ Institution: _____

Please provide email address, mailing address and phone number where you may be contacted.

Email: _____

Phone: _____

Address: _____

How long have you known the applicant? _____

In what capacity have you known the applicant?

Briefly describe the qualities you feel the candidate possesses that would make him or her a good match for the SDNI REU program:

	No Basis for Judgment	Below Average	Good	Excellent (Top 10 %)	Outstanding (Top 2%)
Intellectual Ability					
Motivation					
Written Communication					
Oral Communication					
Ability to work with others					