



University of Missouri – St. Louis

Advanced Credit Program UMSL-Bound Scholarship Request for Letter of Recommendation

TO THE APPLICANT:

Please photocopy this page and give one to each evaluator from whom you request a letter of recommendation.

The University of Missouri–St. Louis provides the following statement waiving access to letters of recommendation written on your behalf. While you are not required to sign the waiver, doing so encourages your evaluators to be candid.

Waiver of Access: I, _____, hereby freely and expressively waive any and all rights to this letter of evaluation granted me by the Family Educational Rights and Privacy Act. I understand this waiver is limited to this document and is irrevocable.

Signature

Date

TO THE EVALUATOR:

The applicant named above has applied for an Advanced Credit Program UMSL-Bound Scholarship at the University of Missouri–St. Louis. This is a four-year academic scholarship renewable annually based on the student's academic performance. Your comments will provide us with a meaningful perspective on the applicant's suitability and will be given serious consideration in awarding of scholarships. Please provide an overview of the applicant that is as comprehensive as your knowledge of him/her allows. To the extent possible, please discuss:

1. The nature and duration of your relationship with this scholarship applicant.
2. The applicant's personal qualities:

a. maturity	e. social concern	i. reliability
b. character	f. emotional stability	j. communication skills
c. judgement	g. interpersonal skills	k. commitment
d. initiative	h. self-awareness	l. leadership ability
3. The applicant's academic achievement within the context of:

a. extracurricular activities	c. academic honors and awards
b. rigor of academic program	d. attendance record

The deadline for receipt of your letter of recommendation is FEBRUARY 1, 2012.

Timely submission of this evaluation will permit optimal review of this candidate's application file. Please submit your evaluation as soon as possible. If necessary to meet the Feb. 1 deadline, you may fax it to (314) 516-7004, Attention: Kathleen Burns. Please follow with the original mailed to the address below.

Please attach this waiver statement to the back of your evaluation and submit both to:

Dr. Kathleen Burns
Director of Advanced Credit Program
University of Missouri–St. Louis
598 Lucas Hall
One University Boulevard
St. Louis, MO 63121-4400

Your evaluation of this applicant's candidacy is an important part of the scholarship selection process. Thank you.