

## Academic Reference Form

**STUDENT:** Please complete this portion of the recommendation form and give it to a UM-St. Louis faculty member who has agreed to write a reference for you.

Name of student: \_\_\_\_\_

Student number: \_\_\_\_\_ Telephone: \_\_\_\_\_

Program for which you are applying: \_\_\_\_\_

Semester(s) you plan to spend abroad: \_\_\_\_\_

Name of faculty member completing this form: \_\_\_\_\_

I hereby authorize the above faculty member to complete this form. I waive my right to access this recommendation and understand that the information provided will be used only for the purpose for which it was prepared.

Signature of student \_\_\_\_\_ Date \_\_\_\_\_

Dear Faculty Member:

Thank you for agreeing to complete this reference form. The student named above has applied for a UM-St. Louis study abroad program and/or scholarship. Acceptance to this program is based on academic ability as well as maturity. It is important to the student and to the University that we select only those students who are most likely to succeed in and benefit from this program. We appreciate your candid opinion as you answer the following questions. As you will note above, the candidate has waived right of access to this reference.

If you have questions regarding this procedure, please contact the **Study Abroad Coordinator at (314) 516-6497**. If you would rather write a letter of reference, please use this form as a guide in providing the information we feel necessary in helping us make admission decisions.

**The student's application cannot be processed until the references are received.** We would appreciate receiving your response as soon as possible. Please do not return the form to the student, but mail it to:

Study Abroad Office  
University of Missouri-St. Louis  
261 MSC, One University Blvd  
St. Louis, MO 63121

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1. How long and in what capacity have you known the applicant? \_\_\_\_\_

2. What is your assessment of this student's ability, academic motivation and past performance?

3. Please indicate the applicant's ability and competence in the following areas in comparison with other individuals whom you have known at similar stages in their academic careers.

	Below Average	Average	Above Average	Very Good	Out-standing	Inadequate Opportunity to Observe
Knowledge in area of specialization						
Able to plan and carry out research/independent study						
Able to express thoughts in speech and writing						
Self-assured and independent						
Emotionally mature						
Socially mature						
Cooperative						
Well-mannered						
Responsible						

**\*\* NOTE: If knowledge of a foreign language is required for program participation, and you have knowledge of the student's capabilities, please answer questions 4 and 5. If not, please move to question 6.**

4. Please indicate your opinion of the applicant's present language ability in each of the following categories:

	NONE	Limited, basic ability	Intermediate, some consistency	Advanced, can use complex structures
Listening ability				
Speaking ability				
Reading ability				
Writing ability				

5. What is your opinion of the applicant's ability to pursue university-level coursework in this language?

- \_\_\_\_\_ Should have no difficulty
- \_\_\_\_\_ Should be able to manage adequately after a short period of adjustment abroad
- \_\_\_\_\_ Will require additional training before beginning the program
- \_\_\_\_\_ Will require considerable training before necessary competence can be attained

6. If selected, this student will be required to make an adjustment to a challenging living environment. The student's success in this program will be strongly affected by this adjustment of living in a foreign culture. Based on your knowledge of the student, please give us your opinion of her/his ability to make such adjustments.

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7. How would you describe the candidate in terms of her/his maturity, sense of responsibility, reliability, honesty and character?

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8. Please use this space to make any additional comments related to the applicant's qualifications for the program. You may attach an additional sheet if necessary.

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9. Please check the statement that most accurately reflects your opinion regarding this applicant.

- The student has my strong recommendation.  
 I cannot recommend this student for the program.  
 I have minor reservations, but am willing to recommend this student with the following reservations:

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**Please print the following information:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title/Position

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Institution/University

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Signature

**Thank you!**