



Study Abroad Faculty/Academic Advisor Recommendation Form

To the student: Please complete two forms and give to one faculty and to one academic advisor, or to two faculty or to two academic advisors at your home university. We will not accept recommendation forms given to us directly from a student.

To the recommender: The student named below has given us your name as a person able to provide an evaluation of his or her qualifications for an academic study abroad program offered through the International Programs & Services office at Michigan Technological University. Students are selected for this program on the basis of 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 to the applicant's qualifications. As you will note below, the applicant has waived right of access to the reference.

The student's application cannot be processed until references are returned. We would therefore appreciate receiving your response as soon as possible. Please do not give this form to the applicant, but return it directly in the attached envelope.

To be completed by the student:	
Name of applicant _____	Telephone _____
E-mail _____	Michigan Tech ID Number _____
Name of home institution or university: _____	
Name of international university for which you are applying: _____	
Semester(s) you plan to study abroad: (Enter term(s) in year format, for example, 2010)	
Fall Only	Spring Only
Summer Session A Only	Summer Session A & B
Summer Session B Only	
Name and title of reference _____	
All rights of access conferred by the Family Educational Rights and Privacy Act of 1974 (P.X. 93-380) as amended, or otherwise, to all information and materials of any kind received by Michigan Technological University from any source in connection with this application are hereby voluntarily waived.	
Signature of student _____ Date _____	

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

2. If selected, this student will be required to make an adjustment to a challenging living situation. The student's success in the program will be strongly affected by this adjustment of living in a foreign environment. Based on your knowledge of the applicant, will you give us your opinion of the student's ability to make such adjustments?

NOTE: If a foreign language is required for program participation and you have knowledge of the student's capabilities, please answer questions #3 and #4. If not, please move to question #5.

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

Language:	Listening Ability	Speaking Ability	Reading Ability	Writing Ability
None				
Limited, Basic Ability				
Intermediate, Some Inconsistency				
Advanced, Can Use Complex Structures				

4. What is your opinion of the applicant's ability to use this language in the host country?

Should have no difficulty

Should be able to manage adequately after a short period of adjustment abroad

Would require considerable training before necessary competence is obtained

5. How would you describe the candidate in terms of maturity, sense of responsibility, reliability, honesty, and character?

6. Please use this space to make any additional comments you want to make concerning the applicant's qualification for the program. (Attach an additional sheet if necessary.)

7. Please check the statement that you feel most accurately reflects your opinion of this student's suitability for the program.

The student has my strong recommendation

I cannot recommend this student for the program

I have minor reservations, but am willing to recommend the student with the following reservations:

Signature

Title

Date

Institution/Firm

Telephone

E-mail

Thank You. Please return this form in a sealed envelope to:

International Programs & Services

Michigan Technological University

1400 Townsend Dr.

Houghton MI 49931

Phone: (906) 487-2160