

LETTER OF RECOMMENDATION

CAPACITY BUILDING PROGRAM IN SCIENCE AND MATHEMATICS EDUCATION (CBPSME)

APPLICANT'S INFORMATION

To be filled out by the applicant

Last Name

Given Name

Middle Name

Maiden Name for married female applicants

Degree Applied For

Note to the Applicant: Ask the recommender to enclose this form in a sealed envelope, with his/her signature written across the seal. The envelope must be submitted with its seal unbroken together with the rest of your application materials to the CBPSME Consortium member-university.

APPLICANT'S EVALUATION

To be filled out by the recommender

Note to the Recommender: Any pertinent information regarding the applicant and your evaluation of the applicant's ability to undertake graduate studies and research will be held in strict confidence.

How long have you known the applicant?

In what capacity have you known the applicant?

If the applicant was a student in some of your classes, what were these subjects?

What do you consider as the applicant's outstanding talents or strengths in relation to graduate study?

What do you consider as his/her weakness or deficiencies in relation to graduate study?

Please rate the applicant on the following characteristics in comparison with other students in the same disciplines who are known to you and who have had more or less the same amount of training and experience. Indicate size of the group with which applicant is being compared and its educational level.

Group Size

Educational Level

	Excellent	Above Average	Average	Below Average	No Basis
1. Intellectual ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Academic preparation for proposed field of study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Motivation for proposed field of study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Originality, creativity & imagination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Analytical & problem-solving ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Initiative and independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Honesty & integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Conscientiousness & ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Oral communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Written communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Potential as a researcher in the discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Potential as a teacher in the discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional information and comments about the applicants (please use a separate sheet of paper, if necessary).

I therefore strongly recommend recommend recommend with reservations do not recommend the applicant for the scholarship program.

Signature over Printed Name

Date

RECOMMENDER'S INFORMATION

Title *Engr./Dr./Prof.*

Given Name

Middle Initial

Last Name

Affiliated Organization

Position in Organization

Address of Organization

Highest Educational Attainment