



**Professional Reference Recommendation Form**

**Instructions** (Please type or print neatly)

**Must use** Adobe Reader Version 11 or higher to fill out the form. The applicant may fill out his/her information electronically. Red fields are required. (Click “Highlight Fields” as needed.) **Be sure to** select the “**Hand Tool**” only. **DO NOT USE:** *Text, Typewriter, or other Markup Tools, etc.* Next, follow one of the appropriate steps below:

1. **Applicant Pre-fills Recommendation Form with Applicant Information:**
  - a. The applicant fills out his/her information below along with the name of the Recommender. Also, the applicant checks the appropriate waiver selection.
  - b. The applicant prints out the form then signs and dates the form in the area provided.
  - c. The applicant may pre-fill the recommender’s: name, title/position, addresses and phone.
  - d. The applicant distributes the form to the recommender.
2. **Recommender fills and Completes Form:**
  - a. The recommender fills and completes the form and attaches a recommendation letter as requested.
  - b. Once the form is completed, the recommender provides his/her signature and dates the recommendation.
3. **Recommender Submits Form In Sealed and Signed Envelope:**
  - a. To applicant to mail, “**OR**”,
  - b. To ERC-RMB directly to: **Research Experiences for Undergraduates (REU) Program, NSF ERC for Revolutionizing Metallic Biomaterials (ERC-RMB), c/o Dr. DeRome O. Dunn, Department of Mechanical Engineering, North Carolina Agricultural and Technical State University, 1601 East Market Street, Greensboro, NC 27411.**

**Information below is to be completed by applicant**

Applicant: First Name	Middle Name	Last Name	
Applicant: E-mail Address	Daytime Phone	Evening Phone	
Applicant Mailing Address	City	State/Country	Zip

**Waiver of access to evaluation**

- Yes, I Do waive my rights to access this evaluation       No, I DO NOT waive my rights to access this evaluation

My signature below authorizes the recommender to provide a recommendation on my behalf.

Signature of applicant	Date (mm/dd/yyyy)
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Direct questions to: DeRome O. Dunn at either [derome@ncat.edu](mailto:derome@ncat.edu) or 336-285-3741.

**Note: This form is two pages. Please submit “BOTH” pages together.**



**Applicant is to complete below for the Recommender**

Recommender: First Name	Middle Name	Last Name
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**The Recommender completes the following:**

*The members of the ERC-RMB REU application committee are interested in your perspectives about the applicant’s personal and academic capabilities. The information you provide will assist the committee members with choosing applicants. We are grateful for your time and assistance.*

Recommender Title/Position	E-mail Address	Phone
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Recommender Mailing Address	City	State/Country	Zip
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**Background Information:** For how long have you known this applicant and in what capacity?

**Applicant Ratings**

Please rate this applicant compared to others with his/her background

<i>Academic</i>	No Ability to Judge	Below Average	Average	Good	Excellent	Outstanding
Academic Success	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative Qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<i>Character/Personality Traits</i>	No Ability to Judge	Below Average	Average	Good	Excellent	Outstanding
Respect for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership/Influence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character and Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for Growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility to Commitments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Attach Letter of Recommendation on Letterhead**

In your recommendation letter, please address the extremes in your ratings above. Please provide concrete examples for your highest rating in both the “Academic” and “Character/Personality Traits” categories. Next, provide concrete examples for your lowest rating in both the “Academic” and “Character/Personality Traits” categories. Finally, include in your letter any other aspects you feel would enable us to genuinely evaluate the applicant.

**Evaluation:** Overall, I recommend this applicant

- Not at all
- With reservations
- Fairly strongly
- Strongly
- Enthusiastically

Your signature indicates that all information on this form is factually true and honestly presented and that you are the person submitting this form.

Signature of Recommender \_\_\_\_\_ Date \_\_\_\_\_

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