

FIRST/LAST NAME (Please PRINT Clearly)

STUDENT ID#: Do Not Enter Social Security Number

SEMESTER PROGRAM (Please Indicate School of Interest)

TO THE STUDENT

This *Academic Reference* should be given to a professor who knows you well and is able to judge your academic qualifications for study abroad. A letter of recommendation on letterhead is also acceptable.

To confirm the receipt of this reference, it is necessary for the student to retrieve his/her reference from the instructor, in a sealed and signed envelope by the faculty member, and hand delivered to the Office of International Programs, Room B119. References which have been tampered with will disqualify the student from his/her study abroad application.

I waive my right to access this reference completed by _____ ~ Yes ~ No
Name of Reference

Student's Signature: _____ Date: _____

TO THE REFERENCE

The student named above is applying for the designated FIT Semester Program Abroad. We would appreciate your assessment of the applicant's attributes with which you are familiar. You may also attach a letter of recommendation.

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

2. Academic attributes

	Excellent	Very Good	Good	Fair	Poor	No Evaluation
Competence in major or specialization	~	~	~	~	~	~
Academic interest and motivation	~	~	~	~	~	~
Capacity for independent study	~	~	~	~	~	~
Resourcefulness	~	~	~	~	~	~
Reliability	~	~	~	~	~	~
Integrity	~	~	~	~	~	~

3. Non-academic attributes

	Excellent	Very Good	Good	Fair	Poor	No Evaluation
Level of maturity	~	~	~	~	~	~
Ability to adapt to new or unstructured circumstances	~	~	~	~	~	~
Self-confidence and self-esteem	~	~	~	~	~	~
Ability to relate well to others	~	~	~	~	~	~
Emotional stability	~	~	~	~	~	~
Open-mindedness	~	~	~	~	~	~
Integrity	~	~	~	~	~	~

4. Please state frankly your opinion of this candidate's ability to suitably represent both F.I.T. and the USA in a study abroad program, weighing both strong and weak points. Please use the reverse side of this page to write your comments on a separate page.

Your Name (please print) _____ Title, Department: _____

Signature: _____ Date: _____ Institution: _____