

Hofstra University Summer Science Research Program Confidential Teacher Recommendation Form

Appraisal of (Student Name):

Name of Teacher:

Your confidential appraisal of the student named above is requested as part of the Program evaluation of her/his qualifications for acceptance into Hofstra University's Summer Science Research Program. The appraisal is in two parts; first, our rating of the student on specific traits and abilities; second, your overall evaluation of the applicant.

	Superior	Good	Average	Poor
Academic potential				
Industry & application				
Oral expression				
Written expression				
Laboratory ability				
Manual dexterity				
Ability to work with others				
Ability to work alone				
Reliability & responsibility				
Motivation				
Social maturity				

General Comments: Please include a brief description of the applicant including their strengths and weaknesses and any personal information you feel would assist the committee in their evaluation.

Please return the completed form in a signed and sealed envelope to Dr. Nanette Wachter, HUSSRP, Chemistry Department, 151 Hofstra University, Hempstead, NY 11549-0151, by **March 26, 2004**.

Signature of Appraiser

Date

Name of Appraiser

School Address