



ACADEMIC RECOMMENDATION FORM

Please fill in your name and address below. This form should be completed by a mathematics or science teacher or club advisor who can assess your work.

Student Name: _____

Home Address: _____

The above student is an applicant for admission to the LEAD Program Summer Engineering Institute and has given your name as a reference. The information you are providing concerning the above named applicant is considered an important part of the application process. Specific statements and your candid assessment of the applicant's potential will be very helpful. We appreciate the information you are providing by completing this form, and for sharing your observations about the applicant.

Instructions: After completing this form, please place it in an envelope (not provided). Seal the envelope and sign it across the seal. You may remit this recommendation to the above named student or mail it directly to LEAD Program for Engineering: 14 East Hartwell Lane, Philadelphia, PA 19118. This form must be received by January 25, 2010.

(Check one) MATHEMATICS TEACHER SCIENCE TEACHER OTHER

1. In what ways would you distinguish this student's academic performance from other students?

2. In what areas does the applicant need improvement?

3. Please provide an example in which this applicant demonstrated a passion for mathematics, science and/or technology.

4. Do you think that this applicant's grades are a valid reflection of his/her academic abilities? Please explain.

ACADEMIC RECOMMENDATION FORM (CONTINUED)

Student Name: _____

In terms of characteristics listed below, please give us your appraisal of the applicant:

CATEGORY	Outstanding	Good	Average	Below Average	Unable to Assess
INQUISITIVE: Looks beyond what is apparent; questioning attitude/needs to know why.					
EXPERIMENTAL: Is inventive; willing to explore unknowns with or without teacher supervision.					
PERSISTENT: Stays with tasks; integration toward long-term goals.					
SELF-STARTER: Highly motivated; independent worker, self-directed; pursues individual interests.					
DESIRE TO ACHIEVE: Is eager to successfully accomplish goals.					
DISCIPLINED WORK HABITS: Turns in assignments in a timely manner.					
LEADERSHIP: Shows maturity/emotional ability; leads when needed or appropriate.					
COMMUNICATION SKILLS: Ability to express thoughts clearly, creatively and concisely.					

I have known the applicant for _____ year/s and/or _____ month/s

OVERALL RATING:

Strongly recommend Recommend Recommend with reservations (explain any reservations below)

COMMENTS: Please use this space to provide any additional information that the Committee should consider when evaluating this student's application to LEAD, including your involvement with him/her outside the traditional classroom, his/her ability to meet personal responsibilities, deadlines, personal initiative, etc. Please also include any obstacles this applicant has had to overcome in pursuing his or her educational goals, if appropriate.

Signature: _____

Date: _____

Telephone: _____

Please attach your business card

Name: _____

Title: _____

Institution: _____

Email Address: _____



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