

Faculty Recommendation Form

Please return form to:
Off Campus Programs Committee

SECTION I (To be complete by the applicant)

PLEASE PRINT CLEARLY!

Name: _____ E-mail: _____
 Applying for program in _____ Semester and Year: _____

SECTION II (To be completed by professor)

The above named student is applying to participate in an Off Campus Study program. Your candid evaluation of the applicant's preparation for such a program, in terms of academic ability and level of maturity and motivation, is very important to us. We thank you in advance for your assistance.

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

2. When and in what class(es) was the applicant your student? _____

3. Please indicate: Excellent Good Fair Poor NA

a) Applicant's academic attributes

- | | | | | | |
|--|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
| <ul style="list-style-type: none"> • Intrinsic academic interest and motivation • Capacity for self-motivated study • Ability to express thoughts orally • Ability to express thought in writing | _____

_____ | _____

_____ | _____

_____ | _____

_____ | _____

_____ |
|--|----------------------------------|----------------------------------|----------------------------------|----------------------------------|----------------------------------|

b) Applicant's academic reliability

- | | | | | | |
|---|---|---|---|---|---|
| <ul style="list-style-type: none"> • Class attendance • Preparedness for class • Interest in class • Conduct in class • Participation in class | _____

_____ | _____

_____ | _____

_____ | _____

_____ | _____

_____ |
|---|---|---|---|---|---|

c) Applicant's suitability for study abroad

- Ability to adapt to new circumstances _____
- Self confidence and independence _____
- Good judgement _____
- Ability to relate to others _____
- Emotional stability _____
- Open mindedness _____
- Integrity _____

4. Is the applicant mature enough to make the cultural adjustments required both to benefit from and to contribute to the overseas program, and to represent Erskine College in an exemplary manner?

___ Yes ___ No ___ I am not sure

5. Please provide the Off Campus Programs Committee with any other comments or observations that you think would assist us in our consideration of this applicant.

Signature: _____ Date: _____