RECOMMENDATION FORM
Bemidji State University TRiO McNair Scholars Program

This section is to be completed by the applicant. Please print or type.

Name: ____________________________________________  ____________________________
Last  First  Middle  (Intended) Major/Interest

Optional: All rights of access to this letter of recommendation conferred by the Family Educational Rights and Privacy Act of 1974 (P.L.93-380) as amended, or otherwise, are hereby voluntarily waived. This waiver is not required as a condition for admission to or receipt of any other services and benefits from the McNair Scholars Program.

Signature: ____________________________________________  Date  ____________

This section is to be completed by the recommender to:

Kelli Steggall
TRiO McNair Program Director
Bemidji State University
1500 Birchmont Dr. NE # 22
Bemidji MN 56601
To deliver in person, please bring to the Sanford Hall Office # 6.

Please attach a short personal letter addressing the following questions and return with this form.
• What is the extent of your acquaintance with the applicant?
• What is your frank appraisal of the applicant’s promise as a graduate student and future scholar?
• What are the applicant’s greatest strengths and weaknesses?
• Please indicate whether you will be conducting research during the summer of 2013 and are willing to mentor this scholar or another McNair candidate.

In comparison with a representative group of students in the same field with approximately the same amount of experience and training, how does the applicant rate in the following areas?

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<th></th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Outstanding</th>
<th>Unable to Judge</th>
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<tbody>
<tr>
<td>Academic Aptitude and Potential for Graduate Work</td>
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<td>Academic Performance in Major</td>
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<td>Motivation for Advanced Graduate Study</td>
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Name _____________________________  Title ______________________
Department _________________________  Institution ___________________
Signature ________________________________________________
Phone _____________________________  Email ______________________