HEDCO Institute Undergraduate Scholars Program Faculty Letter of Recommendation Form

Name of student applicant: ______

Name of faculty member: _____

I. Please rate the applicant on the qualities listed below:

	Upper				Lower	No Basis
	1-2%	5%	10%	25%	50%	
Academic Preparation						
Independent Thinking						
Critical Thinking and Problem Solving Skills						
Judgment and Maturity						
Industry, Motivation, and Timeliness						
Organizational Skills						
Effectiveness of Oral Communication						
Effectiveness of Written Communication						
Indicate the comparison group upon which yc	our ratings ar	e based:				
In what capacity do you know or work with the applicant?						

II. Written statement:

Use the following section to describe the candidate's qualifications and promise as a student researcher and scholar. Of particular interest is your assessment of the applicant's critical thinking and problem solving skills; innovation; and motivation and capacity for independent study. Please use only the space provided.

NOTE: Under the Family Educational Rights and Privacy Act of 1974 and according to the University of Oregon Student Record Policy, registered students are given the right to inspect their records, including letters of recommendation and teacher recommendations. If the student wants to waive their right of access to this recommendation, they may do so by <u>submitting a waiver</u>. If the Undergraduate Research Opportunity Program does not receive a waiver, the faculty letter of recommendation will be considered non-confidential.