To the Applicant:

Your application requires one letter of recommendation from a faculty member who knows you well enough to speak about your qualifications. Complete the following information and ask your recommender to complete the questionnaire at the end of this form and write a letter in support of your application. Please instruct your recommender to return both the letter and this form via email to Briana Muñoz-Flores at bmunozflores@ucsb.edu.

Applicant's Information:

(Please Print) Last Name  First  Middle

_____________________________________  ___________________________________  

Email:  Phone:

To Recommenders:

The goal of the UCSB Academic Research Consortium Summer Program is to prepare and encourage talented scholars from diverse backgrounds to compete for doctoral programs at UCSB and at other University of California campuses. Our research programs are intended to acquaint participants with UCSB faculty and graduate programs, and to familiarize scholars with the nature of graduate work by providing them with experience in an academic research environment. Your response to the questions below and your letter of recommendation will help us assess your student’s maturity, level of preparation, and potential to benefit from participation in our seven-week summer program. For more information, visit http://www.graddiv.ucsb.edu/admissions/outreach/academic-research-consortium.

Please mark the appropriate response below and provide additional comments about the applicant in your written recommendation.

Information Provided by Recommender:

1. I have known the applicant as:  ☐ a student  ☐ a research assistant  ☐ other

2. I have known the applicant for ___ years ___ months

3. Applicant’s achievement reflects her/his/their ability:  ☐ extremely well  ☐ very well  ☐ not well

4. Applicant’s ability to set realistic & attainable goals:  ☐ excellent  ☐ good  ☐ fair  ☐ poor

5. Applicant’s commitment to her/his/their education is:  ☐ excellent  ☐ good  ☐ fair  ☐ poor

6. I know the applicant:  ☐ extremely well  ☐ moderately well  ☐ not well

7. I recommend this applicant:  ☐ very enthusiastically  ☐ moderately  ☐ not at all
Faculty Recommendation (cont.)

Written Comments:
Written comments about character, integrity or motivation are used to evaluate the applicant’s potential for success and compatibility with the goals of the UCSB summer research program. Please provide a written recommendation of this candidate according to your knowledge of her/his work and, if possible, a detailed assessment of the applicant’s research in his/her field thus far. You may use the space below or attach a letter. Thank you.

Name (print):________________________________________  Title:  _____________________________________
Institution:  ____________________________________________________________________________________
Department: _________________________________  Email:  ___________________________________________
Date:  ________________________  Signature of Recommender  ________________________________________

Please email your recommendation letter on or before APRIL 8, 2020 to:
Briana Muñoz-Flores - Assistant Director of Outreach
bmunozflores@ucsb.edu
(805) 893-2104