



"Strengthening Undergraduates and Graduates Students
Learning through Improvement of Teaching activities"



Recommendation Form

TO APPLICANT: Complete this section and give it to the person who will be making the recommendation. The recommendation must be sent by the recommender directly to **sugslearningtita@gmail.com** before the application deadline (May 1, 2018).

Applicant Name: _____
Last Name First Name Middle Initial

Degree: _____ Major: _____

Specialty (if applicable): _____

Entry Semester: _____

Expected Graduation Date: _____

In accordance with the provisions of the Family Education Rights and Privacy Act of 1974, the applicant has the right to examine this letter of recommendation once it is included in his/her record as an applicant to the program described above.

_____ I do not waive this right

_____ I waive this right

Applicant's Signature

RECOMMENDER: This letter should be sent directly by the recommender to **sugslearningtita@gmail.com** before the application deadline (May 1, 2018).

Name (please print):

Position:

Institution in which you work:

Address:

Telephone:

E-mail:

How long have you known the applicant? _____ years _____ months

In what capacity?

- ☐ Mentor
- ☐ Instructor/Teacher
- ☐ Research Supervisor
- ☐ Other



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Please give your evaluation of the applicant using the criteria presented below.

Evaluation Criteria	Outstanding (Top 2%)	Very Good (Top 10%)	Good (Top 25%)	Average (Top 50%)	No basis for judgment
Intellectual ability/capacity:					
Analytical and problem-solving ability:					
Meticulousness/attention to detail:					
Thoroughness in completing tasks:					
Oral communication skills:					
Written communication skills:					
Listening skills:					
Interpersonal skills:					
Maturity/emotional intelligence:					
Judgment/common sense:					
Ability to work well with others:					
Motivation:					
Initiative:					
Perseverance:					
Creativity/originality:					
Flexibility:					
Leadership potential:					
Self-confidence:					
Responsibility:					
Integrity/Work ethic:					
Respect for authority:					
Time management skills:					
Ability to work under pressure:					
Overall scholarly ability:					
Potential as a researcher:					

EVALUATION SUMMARY:

_____Recommended without reservations

_____Recommended with some reservations

_____Not recommended

Evaluator's signature

Date

Additional comments: Describe the applicant's strengths and weaknesses, placing special emphasis on criteria not included in the previous table that you might consider important for the student's success in our program. Please feel free to use additional paper, if necessary.

Thank you for completing the recommendation for the candidate. Send your recommendation to the following address (mailed or electronically):

UPR-RUM
María L. Plaza
Call Box 9000
Mayaguez, PR 00681-9000
sugslearningtita@gmail.com