

RECOMMENDATION FORM

Doing Business In China – 2010

STUDENT NAME _____

STUDENT ID NUMBER _____

REFEREE NAME _____

TO THE STUDENT: This form should be given to the referees listed in your application and be returned to Kim Benson in the Rader School of Business by the application due date. Under the Family Educational Rights of Privacy Act of 1974 (Buckley Amendment), you have the right to either review this recommendation or to waive your right to see it. Please check one and sign:

- I do waive my right of access to this recommendation.
 I do **not** waive my right of access to this recommendation.

Signature _____ Date _____

TO THE REFEREE:

This student is applying for the MSOE China Program. The Program has high academic standards and requires students with the maturity and self-reliance necessary to adapt to a culture and to educational experiences very different from their own. Please use the questions below to evaluate the student. Note: The student is entitled to review this reference under the Family Rights and Privacy Act of 1974 (Buckley Amendment) if he/she selected the appropriate box above.

How long and in what capacity have you known this student?

Basis of assessment

- Academic Professional Colleague

Please state your opinion of this applicant's chances for success (both academic and non-academic) in this study abroad program. Keep in mind the following: personal suitability for study abroad; how an international experience may benefit the applicant; and strengths which you believe the applicant may bring to such an experience.

(PLEASE TURN OVER)

Please comment on the applicant's intellectual and academic strengths and weaknesses.

Please rate the applicant on the following characteristics:

	Excellent	Good	Fair	Poor	No opportunity to observe
Academic ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative/Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to deal with stress and ambiguity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical thinking ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall, I would _____ would not _____ unclear _____ recommend this student for travel abroad and as a representative of MSOE abroad.

Please explain the above

Signature _____

Date _____

Printed Name _____

Title/Position _____

Dept/Organization _____

Phone and Email _____

Please return this form to Kim Benson:
Rader School of Business
1235 N. Milwaukee St. | Milwaukee, WI 53202 | Fax: 414-277-7479 | email: benson@msoe.edu