



2019-2020 ISP Recommendation Form

Please submit one copy of your remarks in a sealed and signed envelope to the MSC Leland T. and Jessie W. Jordan Institute Office in **Room 2293 of the Student Programs Office** in the Memorial Student Center, by campus mail to **Mail Stop 1237 Attn: Jordan Institute**, or by email at jiwork@msc.tamu.edu (please include student's name in the subject line).

THIS SECTION TO BE COMPLETED BY APPLICANT

Name of Applicant:

Classification:

UIN:

Reference requested from:

THIS SECTION TO BE COMPLETED BY REFERENCE

1. This reference is prepared with the understanding that my comments will be held in confidence.
 Yes No
2. How long and in what capacity have you known the applicant?

For sections 3 and 4, please keep in mind that the applicant will be representing the United States as well as TAMU and that both personal suitability and academic excellence are important criterion to be considered.

3. Please indicate your judgment of the applicant's professional ability and competence below.

(Check one for each category)

	Outstandin g	Very Good	Averag e	Below Average	Inadequate Basis for Judgment
General Knowledge					
Intellectual Ability					
Maturity/Stability					
Judgment/Problem-Solving					
Oral Communication					
Written Communication					
Independence/Self- Direction					
Motivation/Commitment					
Creativity/Originality					
Flexibility/Adaptability					
Self-Reliance					
Impression of Citizenship					

4. Final Overall Rating of Student (Check one):

Exceptional
 Average

Very Good
 Fair

Above Average
 Not Recommended

Signature of Reference:

Date:

