

## 2023-2024 Fellows Program Recommendation Form

Please submit one copy of these remarks by email to <a href="mailto:jiwork@msc.tamu.edu">jiwork@msc.tamu.edu</a> or in a <a href="mailto:sealed and signed">sealed and signed</a> envelope to the MSC Leland T. and Jessie W. Jordan Institute, Room 2293 in the Memorial Student Center, mailstop 1237 by 5 p.m. on October 26th, 2023

	5 p.m.	on October 26th,	2023.	ŕ	1	
THIS SEC	CTION IS TO B	E COMPLETE	D BY THE AP	PLICANT		
Name of Applicant:						
Classification:				UIN:		
Name of Reference:						
THIS SEC	CTION IS TO B	E COMPLETE	D BY THE REI	FERENCE		
1. How long and in what capac	city have you kno	own the applicant	?			
For sections 2 and 3, please keep University; both personal suitab						
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2. Please indicate your judgem	ient of the applica	ant's professional	ability and com	petence below.		
	(Select	one for each cat	egory)			
	Outstanding	Very Good	Average	Below Average	Inadequate Basis for Judgement	
General Knowledge						
Intellectual Ability						
Maturity/Stability						
Judgement/Problem-Solving						
Oral Communication						
Written Communication						
Independence/Self-Direction					1	
Motivation/Commitment						
Creativity/Originality						
Flexibility/Adaptability						
3. Overall Rating of Student (0	Check one):					
Exceptional	Very Good			Above Average		
Average	Fair			Not Recommended		
Signature of Reference:		Date:				