

Reference – Faculty/Staff

| Applicant: please complete t | his section. |
|----------------------------------|---|
| | Applicant's Name |
| • | Education Rights and Privacy Act of 1974, the candidate may have access |
| to this evaluation unless access | is waived by completing the following statement: I, |
| | waive my right to access this evaluation. |

To the Faculty or Staff Member:

The National Student Exchange (NSE) provides students with the opportunity to attend another member university within the United States, Canada, Guam, Puerto Rico and the U.S. Virgin Islands for a single term or an academic year. Students participate in NSE to take advantage of the unique geographic, cultural, and academic characteristics of institutions and/or regions.

In making decisions on the appropriateness of a student's participation in the exchange, we need to know about their motivation, adaptability, academic skills, and those personal qualities that will give students the ability to benefit fully from the exchange experience. While we will appreciate any observations that will assist us in evaluating the present applicant, of special interest are qualities such as competence, independence, assertiveness, resourcefulness, quality of performance, confidence, social skills, open-mindedness, and integrity.

Please indicate the basis and extent of your acquaintance with the applicant. Placing your remarks in a comparative perspective will further assist the NSE office in reaching a decision about the applicant.

In summation, please state frankly your opinion of this applicant's chances for academic and nonacademic success in an exchange program, weighing both strong and weak points.

| Extensive contact in a variety of settings Well acquainted in classroom or campus environment Limited contact in classroom or campus environment Other | 1. | How well do you know the applicant? (Check the most appropriate response.) | | | | | | | | | | | |
|--|--------------|---|-------------------|------------|------------|------------------|------|-------|-----------|---------|--|--|--|
| please rate the applicant in these areas. (Circle the most appropriate response.) Below Unable to | | ☐ Well acquainted in classroom or campus environment ☐ Limited contact in classroom or campus environment | | | | | | | | | | | |
| Academic Ability | 2. | ·-· | | | | = | | - | | cation, | | | |
| Maturity Cooperation and Adaptability 4 3 2 1 X Cooperation and Adaptability 4 3 2 1 X Initiative and Motivation 4 3 2 1 X Social Skills 4 3 2 1 X Open-mindedness 4 3 2 1 X Integrity 4 3 2 1 X Independence 4 3 2 1 X Independence 4 3 2 1 X Self-Confidence 4 3 7 Self-Confidence 4 7 Self-Confidence 5 Self-Confidence 7 Self-Confidence 8 Self-Confidence 9 Self-Confidence | Exc | ellent | Very Good | Average | Average | Judge | | Below | Unable to | | | | |
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| Independence 4 3 2 1 X Resourcefulness 4 3 2 1 X Self-Confidence 4 3 2 1 X Self-Confidence 4 3 2 1 X Self-Confidence 4 3 2 1 X 3. Exchange to another campus would be appropriate for the applicant: Yes No 4. Remarks Based on your knowledge of the applicant, please comment on his/her chances for success and what would be gained from an exchange experience. Name (print) Title Phone E-mail | | | | | | | | | | | | | |
| Resourcefulness 4 3 2 1 X Self-Confidence 4 3 2 1 X 3. Exchange to another campus would be appropriate for the applicant: Yes No 4. Remarks Based on your knowledge of the applicant, please comment on his/her chances for success and what would be gained from an exchange experience. Name (print) Title Phone E-mail E-mail | | | | | | | | | | | | | |
| Self-Confidence 4 3 2 1 X 3. Exchange to another campus would be appropriate for the applicant: Yes No 4. Remarks Based on your knowledge of the applicant, please comment on his/her chances for success and what would be gained from an exchange experience. Name (print) Title Phone E-mail Phone E-mail | | • | | | | | | | | | | | |
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| Phone | | Remark Based o | s on your know | ledge of t | he applica | int, please comr | | | | nd what | | | |
| | Name (print) | | | | Title | <u> </u> | | | | | | | |
| | Phone | | | | | E-r | nail | | | | | | |
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Return this form to: NSE Program Coordinator Office of Equal Opportunity and Compliance

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