

Great Lakes Research Experience For Undergraduates Recommendation Form

- Be sure to sign and date it after filling out the form
- Please save this form with your name and the name of the applicant (e.g. Haggarty for Alonzo CMU REU Recommendation)
- Email this form to iglr@cmich.edu by Friday, February 2, 2024
- Please use Adobe Reader to complete this form and NOT Apple Preview

| Name of Applicant: | |
|---|---|
| | Position: |
| Affiliation/Institution: | |
| | _ Email: |
| How do you know the applicant? | _ Lindii. |
| low do you know the applicant: | |
| | |
| How long have you known the applicant? | |
| Rank the applicant for each of the attributes and abstudents you are comparing the applicant to and the | oilities by placing an X in the chart below. Indicate what group of the number of students in that group: |
| Comparison group(s): High School Ulanber of students in this group: | |
| | |

| | Exceptional Top 2% | Outstanding Top 10% | Good Top 25% | Average Top 50% | Below Average | Unable to Judge |
|-----------------------------------|-----------------------|------------------------|-----------------|--------------------|------------------|--------------------|
| Academic Performance | | | | | | |
| Intellectual Ability | | | | | | |
| Responsibility | | | | | | |
| Maturity | | | | | | |
| Initiative/ Motivation | | | | | | |
| Writing Ability | | | | | | |
| Verbal Ability | | | | | | |
| Research Ability | | | | | | |
| Ability to Work With a Team | | | | | | |
| Potential to Conduct Fieldwork | | | | | | |
| Leadership Capability | | | | | | |

| Using the | scale below, i | ndicate you | r overall rec | commend | lation for the ap | oplicant by | checking a ı | number: | |
|---------------|----------------|-------------|----------------|------------|--------------------------------|-------------|--------------|---------|--------------------------|
| 10 Highest | <u></u> 9 | 8 | 7 | <u></u> 6 | 5 With Some Reservations | 4 | 3 | 2 | 1 Do Not Recommend |
| for a resea | | e at a remo | te field stati | ion. Be su | e the attributes | | | | |
| Signature | of Recommer | nder: | | | | | Date: | | |
| | | | | | | | | | |

Questions? Contact the Program Coordinator

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