

## **SU LSAMP Summer 2021 Research Program Faculty Recommendation Form**

## **Instructions for the Applicant**

Complete the top section of this form. Please type or print your recommender.	legibly. Give this form to the faculty member serving as					
Applicant's Name:						
☐ I hereby waive my right of access to this recommendation.						
$\square$ I hereby <b>do not</b> waive my right of access to this	s recommendation.					
Signature:	Date:					
To Be Completed By the Recommender						
The Syracuse University Louis Stokes Alliance for Minority academic year research opportunity that provides undergous distinguished faculty and staff as well as network with other opportunity to conduct and present research under the direction.	raduate scholars with the opportunity to work with					
Please return this form and a separate recommendation le	etter in time for the applicant by March 10, 2021.					
Email completed faculty recommendations to	o:					
Lee Pomeroy, SU-LSAMP Research Program, 315.443.5274   <a href="mailto:lsamp@syr.edu">lsamp.syr.edu</a> [Subject line: Recommendation LSAMP – Applicant's Nan	ne]					
Recommender's Information						
Name:	Title:					
Email:	Telephone:					
University Department:						
In what capacity do you know the applicant?						
How long have you known the applicant?						



## Please rate the applicant using the scale below:

	Excellent	Good	Fair	Poor	Unable to Judge
Intellectual skills					
Ability to express him/herself					
Potential for conducting research					
Work ethic and responsibility					
Motivation for graduate study					

## **Recommendation Letter**

State your overall recommendation for this student, providing an assessment of their character, qualifications, and potential for success in research. Please include in your statement details about their strengths and weaknesses based on your knowledge of their work and abilities.