



Robert A. and Sandra S. Borns Jewish Studies Program
Indiana University

**2008-2009 Scholarships Recommendation and/or Administrative
Internship Recommendation**

RECOMMENDATION FORM

Application Deadline: Friday, February 29, 2008

It is the applicant's responsibility to get this recommendation form to a faculty member and to see that it reaches the Jewish Studies Program office by February 29. No application will be reviewed until the application file is complete.

(This section to be filled in by applicant)

Applicant's Name: _____

The Family Education Rights and Privacy Act of 1974 opens many student records for the student's inspection. The law permits you to sign this waiver relinquishing your right to inspect this letter of recommendation. Sign below if you give up your right to read this recommendation. Do not sign if you wish to read it.

Signature _____ Date _____

This form is provided for your convenience in writing a recommendation for the above-named individual for a Jewish Studies scholarship or internship for the 2008-2009 year. It is expected that the student will inform you whether the application is for a scholarship(s) and/or the administrative internship.

Name of person writing recommendation: _____

Position/Title: _____

Address: _____

Telephone Number: _____

E-Mail Address: _____

1. How long have you known the applicant? _____

How well do you know the applicant? ___ Very well ___ Fairly well ___ Slightly

Title of course(s) applicant has taken with you and his/her performance in the course(s) compared with: a) other students' work, and b) your expectation for performance:

2. Please rate the applicant relative to other students/employees:

| | Outstanding Top 5% | Excellent next 10% | Good next 10% | Other |
|------------------------------------|-----------------------|-----------------------|------------------|-------|
| Academic Performance | _____ | _____ | _____ | _____ |
| Scholarly Potential | _____ | _____ | _____ | _____ |
| Job Performance (if applicable) | _____ | _____ | _____ | _____ |
| Oral communication skills | _____ | _____ | _____ | _____ |
| Written communication skills | _____ | _____ | _____ | _____ |

3. Please comment on the applicant's maturity, reliability, seriousness of purpose:

4. Please comment on the applicant's strengths and weaknesses:

5. Your assessment of the applicant's overall academic potential:

6. Please comment on any other factors that bear on the applicant's capacity and potential:

Date _____ Recommender's signature _____

Please return this statement **by Friday, February 29, 2008** to the Jewish Studies Program, Goodbody Hall 326, 1011 E. Third Street, Bloomington, IN 47405-7005. FAX: (812) 855-4314.