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

2011-2012 SARA AND ALBERT REUBEN SCHOLARSHIPS
FOR THE STUDY OF THE HOLOCAUST

RECOMMENDATION FORM

Application Deadline: Tuesday, March 1, 2011

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 March 1. No application will be reviewed until the application file is complete.

(This section to be filled in by applicant)

Applicant’s Name: ____________________________________________________________

The Family Educational 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 letters 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 _______________

Dear Faculty Member,

The IU Jewish Studies Program appreciates your help in enabling us to evaluate this applicant. We are pleased to offer two $1,000 Sara and Albert Reuben Scholarships to support funding for IU students to attend Holocaust-related conferences, to do research in archives and libraries, to subsidize a Holocaust-related internship, to engage in research and the support of honors theses, master’s theses, or a dissertation and other academic initiatives related to the Holocaust during the academic year 2011-2012. Reuben monies can only be awarded in fall and/or spring when the recipient is a full-time student.

We are particularly interested in knowing: how long and in what capacity you have known the candidate; courses that the applicant has taken under you and his/her performance in the course in comparison to other students’ performances; specific instances in which the candidate demonstrated significant ability; the applicant’s maturity, reliability, and seriousness of purpose; the applicant’s oral and written communication skills; the applicant’s scholarly potential; and any other factors that bear on the applicant’s capacity and potential, and seriousness of purpose in study of the Holocaust. Most importantly, we would appreciate your statement of why you believe the nominee deserves funding to study the Holocaust and your assessment of the viability and merit of the student’s proposed use of the scholarship monies.

(over)
If you use your own stationery, please include the above information in your letter and attach to this form.

Name of recommender ____________________________________________

Title or Position ____________________________________________

Address ____________________________________________

Telephone number ___________________ E-mail address _______________________

Signature ___________________________ Date ______________________