

## MCNAIR SCHOLARS

This section to be completed by applicant. Please print or type.

## Recommendation Form

University of Georgia 125 Milledge Hall Athens, GA 30602 Phone: 706-542-7242

(Last Name) (Fire	rst Name) (Middle Name)		Name)	(Graduate Discipline of Interest)			
be completed by recommender and 19250@uga.edu. The McNair Schoduate studies, to enter, and succeed eive support in writing, submitting, alents in the graduate school application applications of the applicants promise as a licant? To what extent do you belie or rather than use this form, please of	lars Program in program and present tion process graduate st ve the appli	om encourage as of doctora ing their res s. Please hel, udent and fu cant could be	es first-general study. After earch finding us assess that ture scholar? enefit from the	ation, low-in an intensive s at a nation he promise an What is the c e program se	come and stude eight -week int al conference. ad motivation of extent of your a ervices? If you	nts underrep ernship, McN Program per f this student. cquaintance v prefer to writ	resented in Vair Schold School ass What is y with the See a person
ummary Evaluation: a comparison with a representative group of udents in the same field who have had oproximately the same amount of experience and training, how does the applicant rate in the following areas?	BELOW AVERAGE	AVERAGE	SOMEWHAT ABOVE AVERAGE	GOOD	OutStanding	UNABLE TO JUDGE	OTHER COMMENT
	Lowest 40%	Middle 20%	Next 15%	Next Higher 15%	Highest 10%		
cademic Aptitude and Potential for raduate Work							
esent Academic Performance in Area Interest							
otivation for the Proposed Program of udy							
dditional Comments:							
(Signature)	(Institution)			(Address)			
(Name/Title - Please print or type)	(Date)			(Telephone Number)			