

**MCNAIR SCHOLARS**

Recommendation Form

University of Georgia | 122 Milledge Hall | Athens, GA 30602 | 706-542-7575 | Fax 706-583-8246

(Graduate Discipline of Interest)

(Middle Name)

(First Name)

(Last Name)

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

***To be completed by recommender and returned, directly to McNair Scholars Program at address given above or emailed to*** [***sbolden@uga.edu.***](mailto:sbolden@uga.edu)*The McNair Scholars Program encourages first-generation, low-income and students underrepresented in graduate studies, to enter, and succeed in programs of doctoral study. After an intensive eight-week internship, McNair Scholars receive support in writing, submitting, and presenting their research findings at a national conference. Program personnel assist students in the graduate school application process. Please help us assess the promise and motivation of this student.*

What is your appraisal of the applicants promise as a graduate student and future scholar? What is the extent of your acquaintance with the applicant? To what extent do you believe the applicant could benefit from the program services? If you prefer to write a personal letter rather than use this form, please do so and attach your letter to this form. Thank you for your prompt cooperation.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Summary Evaluation:**  In comparison with a representative group of students in the same field who have had approximately 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 COMMENTS** |
| Lowest 40% | Middle 20% | Next 15% | Next Higher 15% | Highest 10% |  |  |
| Academic Aptitude and Potential for Graduate Work |  |  |  |  |  |  |  |
| Present Academic Performance in Area of Interest |  |  |  |  |  |  |  |
| Motivation for the Proposed Program of Study |  |  |  |  |  |  |  |

**Additional Comments:**

(Signature) (Institution) (Address)

(Name/Title - Please print or type) (Date) (Telephone Number)