

PERSONAL REFERENCE FORM

To the Applicant:

This form should be given to the professors who are able to comment on your qualifications for study abroad. You should not request a recommendation from a non-academic person unless you have been away from academic institutions for some time.

Name of Applicant _____

Program for which applicant is applying: **Israel Undergraduate Program – Summer 2009**

Applicant's Waiver of Right Access:

The family Educational Rights & Privacy Act of 1974, as amended (P.L. 93-380), allows a candidate to waive his or her right of access to confidential statements written on his or her behalf. The university does not require you to make such a waiver as a condition for admission.

I hereby waive my right of access to this recommendation:

Name: _____ Date: _____ Signature: _____

To the Referee:

Name of person providing reference: _____

Position _____ Institution _____

Address _____ Phone # _____

How long and in what capacity have you known the applicant? _____

Please rank below the applicant's ability and professional competence in comparison with other individuals whom you have known at similar stages in their careers.

	Outstanding	Very Good	Good	Average	Below Average
Motivation & seriousness of purpose	_____	_____	_____	_____	_____
Ability to organize & express ideas orally or in writing	_____	_____	_____	_____	_____
Emotional stability & maturity	_____	_____	_____	_____	_____
Ability to adapt & get along with others	_____	_____	_____	_____	_____
Impression he/she will make abroad	_____	_____	_____	_____	_____

Please add any remarks that would help in the evaluation of the applicant.

Signature of Referee _____ Date _____

Please return this form to: **Cindy Stockwell – Williams College of Business – Xavier University**
3800 Victory Parkway – Cincinnati, OH 45207-3230