

Confidential Reference Form for International Exchange/Study Abroad Application

Office of International Programs and Initiatives 215 Eielson Building • P.O. Box 757760 Fairbanks, AK 99775-7760 USA

1-907-474-7192 (voice) • 1-907-474-5979 (fax) • ekiseri@alaska.edu • www.uaf.edu/oip/

To the	student:											
As part of your application for academic exchange or study abroad, you are required to submit at least three academic or professional												
references. You may not be related to the reference. At least two of the references must be from UAF faculty members from whom you												
have t	have taken a class in your degree program (even if s/he is no longer a faculty member at UAF). Please complete this section before											
		nce with this fo		0 ,		,						
Full Name:						UA ID:						
							、 —					
Tam	applying to:					in (city, countr	ry):					
	Univ	versity/Program Na	me									
for a	Semester	() Year	○ Summer	program beginning in								
		please choose on	2		Fall Semeste	r, Spring Semester, S	Summer	Year				

To the reference:

The student named above is applying for an academic exchange or study abroad program with the UAF Office of International Programs & Initiatives (IPI), and has selected you to evaluate his or her qualifications. Because international education involves many challenges, **we would appreciate your frank and honest appraisal of the student** so that we may make an informed decision on the student's application. No applicant is selected or rejected on the basis of one reference; supporting statements and documentation are obtained from many sources. This form is reviewed by staff and faculty members responsible for administering the program to which the student is applying. It is not shared with the student. With your permission, though, it may also be forwarded to the program abroad (please see second page). Please complete both pages of this form; a letter may be substituted, but we request that the letter address the information on this form. If the reference is returned to the student, it must be in a sealed envelope (please sign across the seal); otherwise, please mail, fax, or scan/ email it to:

Exchange and Study Abroad Advisor · Office of International Programs & Initiatives · University of Alaska Fairbanks 215 Eielson Building · P.O. Box 757760 Fairbanks, AK 99775-7760 · 907-474-5979 (fax) · ekiseri@alaska.edu

Name:	Title/Position:					
Department/Organization:						
Email Address:	Phone Number:					
Your relationship to the student (please check all that apply):						
I have taught the student in the following UAF class(es):	Other (please specify):					
 I am the student's academic/faculty advisor at UAF. I am the student's supervisor/employer. 						

How long have you known the student?									

How well do you think the student wo	ould a	adap	t to a	an in	tern	atio	al academic setting?						
-													
	c							- -					<u> </u>
Please rank the student in the	MO			age	_	lent		MO			age	-	lent
following categories:	Unknown	Poor	Fair	Average	Good	Excellent		Unknown	Poor	Fair	Average	Good	Excellent
Academic work	0	0	0	0	0	\bigcirc	Interaction with peers	0	0	0	0	0	\bigcirc
Intellectual curiosity	0	0	\bigcirc	0	0	\bigcirc	Adaptability	0	\bigcirc	0	0	0	0
Oral expression	0	0	\bigcirc	0	0	\bigcirc	Ability to work independently	0	\bigcirc	0	\bigcirc	0	0
Written expression	0	0	\bigcirc	0	0	0	Participation/teamwork	0	0	0	\bigcirc	0	\bigcirc
Attendance/reliability	0	0	0	0	0	\bigcirc	Self-confidence	0	0	0	0	0	0
Timeliness with deadlines	0	0	Ο	0	0	\bigcirc	Emotional maturity	0	\bigcirc	0	0	0	\bigcirc
Interaction with faculty/superiors	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	Social maturity	0	\bigcirc	Ο	\bigcirc	\bigcirc	\bigcirc

Please provide any further information that you feel is relevant to the student's participation in an international program:								
Recommendation:								
○ I recommend the student without reservation.								
\bigcirc I recommend the student, but with reservation (please describe above).								
○ I do not recommend the student.								

Confidentiality statement:

⊖do

🔿 do not

give IPI my permission to share this reference with the student's program abroad.

Date:

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