TO BE COMPLETED BY STUDENT:

Student name: ______________________________ Study Abroad Program: ____________________________

Program Term and Year: _______________________

This form should be given to a professor you have taken a course from in a prior semester at Viterbo University and be returned to Murphy Center 377 by the application deadline.

Under the Family Educational Rights of Privacy Act of 1974 (Buckley Amendment), you have the right to access certain educational records, including letters of recommendation. Section 438 (a)(2)(B) allows you to waive your right of access to specific records. If you do waive your right to access this recommendation, this form will become confidential and you will not be entitled to read it. If you do not waive your right, you retain the privilege to view this recommendation.

Please check one and sign:

☐ I do waive my right of access to this recommendation.

☐ I do not waive my right of access to this recommendation.

Signature __________________________________________    Date________________________

TO BE COMPLETED BY THE PROFESSOR:

This student is applying for a Viterbo Study Abroad Program. The Program has high academic standards and requires students with the maturity and self-reliance necessary to adapt to a culture and to educational experiences very different from their own. Please use the questions below to evaluate the student.

Note: The student is entitled to review this reference under the Family Rights and Privacy Act of 1974 (Buckley Amendment) if he/she selected the appropriate box above.

How long and in what capacity have you known this student?

Please give an assessment of the applicant’s intellectual and academic strengths and weaknesses.
Please state your opinion of this applicant’s chances for success (both academic and non-academic) in a study abroad program. Keep in mind: academic/personal suitability for study abroad; how an international experience may benefit the applicant; and strengths which you believe the applicant may bring to such an experience.

Please rate the applicant on the following characteristics:

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>No opportunity to observe</th>
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<tbody>
<tr>
<td>Academic ability</td>
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<td>Initiative/Motivation</td>
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<td>Interpersonal relations and communication skills</td>
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<td>Dependability and reliability</td>
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<td>Ability to deal with stress and ambiguity</td>
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<td>Critical thinking ability</td>
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<td>Flexibility</td>
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</table>

I recommend this applicant for participation in a cross cultural learning experience:

_____ Without reservation       _____ With minor reservations       _____ With major reservations       _____ I do not recommend

*If not recommended, or recommended with major reservations, please attach reasoning to this form.*

__________________________________________________________________________

Printed Name________________ Position________________ Dept________________________

Signature________________________________________ Date__________________________

Please return this form to: Taylor Lewis, Study Abroad Office, Viterbo University, Murphy Center room 377, tilewis@viterbo.edu

Last Revised 8/15