



COLLEGE OF
SCIENCE & ENGINEERING

BIOLOGY

CENTRAL MICHIGAN UNIVERSITY

BIOLOGY DEPARTMENT SCHOLARSHIPS RECOMMENDATION FORM

To the Applicant:

- Fill out the top portion of the form.
- Email the form to each recommender and be sure to electronically sign and date them.

Name:

Student ID#:

I hereby waive my right to examine this recommendation form.

I do not waive my right to examine this recommendation form.

Electronic
Signature:

Date:

To the Recommender:

- Fill out the form. Be sure to electronically sign and date it.
- Email this form to BioScholarships@cmich.edu

Name of
Recommender:

Position:

Affiliation:

Phone number:

E-mail:

How do you
know the
applicant?

How long have
you known the
applicant?

Rank the applicant for each of the attributes and abilities by clicking the boxes below:

	Exceptional Top 2%	Outstanding Top 10%	Good Top 25%	Average Top 50%	Below Average	Unable to Judge
Academic Performance						
Intellectual Ability						
Responsibility						
Maturity						
Initiative/Motivation						
Writing Ability						
Verbal Ability						
Research Ability						
Interpersonal Skills						
Organizational Skills						
Creativity						
Leadership Capability						

Using the scale below, indicate your overall recommendation for the applicant by checking the box by the appropriate number:

highest

with some reservations

do not recommend

10 9 8 7 6 5 4 3 2 1

(OPTIONAL) If you want to elaborate on qualities not assessed above, attach a separate letter or use the space below. Omission of additional information will not penalize applicants.

Signature of
Recommender:

Date: