



Name of Student Applicant: _____ Date: _____

In accordance with the Family Education Rights and Privacy Act of 1974, you can waive your right to inspect this recommendation by signing the statement below.

I hereby waive my right of access to this recommendation _____
Signature of Applicant Date

Name of Person Providing Reference: _____

Title _____ Name of Organization/Department/Institution _____

Professional/Academic Relationship to Applicant _____ Phone Number _____ Email _____

The above named student is applying to the SaMs Program that provides scholarships up to \$10,000 for the academic year. **The Science and Mathematics Scholars (SaMs) Program Selection Committee appreciates your careful appraisal of the applicant's potential as a science or mathematics major.**

	Inadequate Basis for Judgment	Below Average	Satisfactory	Above Average	Superior
Oral Communication skills					
Leadership ability					
Academic ability					
Written communication skills					
Personal motivation					

In the space below or via an attached letter of recommendation, please assess this student's intellectual ability, past performance, motivation, maturity, and potential for success. Mail to address indicated below.

Signature: _____ Date: _____

Lynn O'Brien, Ph.D.
Program Director
Science and Mathematics Scholars (SaMs) Program at Nazareth College
4245 East Avenue Rochester, NY 14618