Part I. Stud	ent Informatio	on				
Please print	clearly.					
Name Family Name First Name				_ Class Year		
Major						
	luator Inform					
Please email	l this form and	d/or short	recommendat	ion letter to scho	olarships@sebs.rutg	gers.edu THANK YOU!
Evaluator's Name				Position/Title		
Department Associa				tion with Student		
How long ha	ve you known	the applica	nt?			
Part III. Ev	aluation					
A. Please check one.				B. Signature		
I highly	recommend th	is applicant	•			
I recomr	nend this appli	cant.				
I recomr	nend this appli	cant with r	eservation.	Signature		
	T recommend					
				1 64 4 7		
C. Please ci	neck the approp	priate line o	on the scale for	each of the attri	outes listed below.	
AVERAGE	ABOVE AVERGAGE TOP	VERY GOOD TOP 20%	EXCELLENT TOP 10%	OUTSTANDING TOP 5%	CANNOT EVALUATE	
	25%					Overall Academic Ability
						Analytical Skills
						Problem-Solving Skills
					Communication	Effectiveness of Written
						Effectiveness of Oral Communication
						Academic Motivation/Persistence
						Concern for Others
						Emotional Maturity
						Personal Initiative
						Leadership Ability
						Organizational Skills

D. Please provide brief comments on the student's personal and academic qualifications: e.g., character, enthusiasm, imagination, career goals, etc. Specific examples or anecdotes would be helpful. <u>Please submit this form only and/or with brief comments on this form and/or with attached additional sheet with brief comments if needed and/or submit a short recommendation letter to SEBS Faculty Scholarship Committee.</u>