



SUMMER RESEARCH INSTITUTE  
2010

## Letter of Recommendation

### APPLICANT:

Complete the section below and submit this form to a faculty member who knows your academic qualifications. The recommender can return the completed form to you in a sealed and signed envelope for submission with the rest of your application materials or the recommender may send it directly to us by **March 5** to: SUNY AGEP Summer Research Institute, Center for Inclusive Education, Stony Brook University, Frank Melville Jr. Memorial Library E-1340, Stony Brook, NY 11794-3387.

Applicant's Name: \_\_\_\_\_  
Last, First Middle

School Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

In accordance with the Family Education Rights and Privacy Act of 1974, you may waive your right to inspect this recommendation by signing below. Otherwise, you will have access to this recommendation if you become a program participant.

Signature/Waiver: \_\_\_\_\_ Date: \_\_\_\_\_

### RECOMMENDER

The SUNY AGEP Program sponsors a nine or ten-week Summer Research Institute (SRI) for eligible underrepresented students majoring in a science, engineering, or mathematics discipline. Selected students must show interest and great promise in pursuing a doctoral degree and an academic career. The SRI offers an outstanding opportunity for participants to work closely with faculty mentors on research projects. They will also benefit from skill building courses and workshops designed to enhance their competitiveness as graduate school applicants and their success in graduate study.

Please complete Sections A, B, C, and D of this recommendation form.

**A.** Recommender's Name: \_\_\_\_\_ Title: \_\_\_\_\_

University: \_\_\_\_\_ Dept: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Recommender's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**B.** How long have you known the applicant and in capacity?

**C.** Please rate the applicant using the scale below.

	Excellent	Good	Fair	Poor	No Basis for Judgment
Academic performance					
Intellectual ability					
Ability to express him/herself					
Potential for conducting research					
Work ethic and responsibility					
Maturation and self-confidence					
Motivation for graduate study					

**D.** On a separate sheet, state your overall recommendation for this student, providing an assessment of his/her character, qualifications, and potential for success in research and graduate study. Please include in your statement details about his/her strengths and weaknesses based on your knowledge of his/her work and abilities.

*This form and your letter may be returned to the applicant in a signed and sealed envelope or returned directly to the SUNY AGEP Summer Research Program at the following address by the deadline given above:*

SUNY AGEP Summer Research Institute  
Center for Inclusive Education  
Stony Brook University  
Frank Melville Jr. Memorial Library E-1340  
Stony Brook, NY 11794-3387

*Contact us with questions or concerns at:*

631-632-1387 office

631-632-1837 fax

sunyagep@notes.cc.sunysb.edu