GONZAGA-STARTALK SUMMER CHINESE COURSE
ACADEMIC RECOMMENDATION

TO THE STUDENT: Please complete and sign this top section before giving the recommendation to one of your teachers (former or current). Your teacher may return this form directly to you or s/he may return it directly to us using the instructions in the box at the bottom of the page.

Name: _____________________________________
Phone: _____________________________________ E-mail: ______________________________

Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this recommendation and understand that the information provided will be used only for the purposes for which it was prepared (check one):  □ Yes  □ No

Signature: ___________________________ Date: _____________________________________

TO THE RECOMMENDER: You have been designated by this applicant to provide a recommendation. Your confidential report of this student’s academic background, intellectual ability, and maturity will help us in the selection process. The student is applying to participate in an intensive summer language course. It will be a challenging academic experience. Your careful assessment of the student’s qualifications will be appreciated.

When and in what courses did you teach this student?

Are there any special considerations we should be aware of?

The following categories are intended merely as guidelines. Please check the boxes or use the space provided for comments. We are interested in a complete evaluation of whatever you deem important in describing this student.

<table>
<thead>
<tr>
<th>Category</th>
<th>Do not know</th>
<th>Below average</th>
<th>Average</th>
<th>Above average</th>
<th>Excellent</th>
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<tbody>
<tr>
<td>Academic ability</td>
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<td>Academic motivation</td>
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<td>Class attendance</td>
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<td>Maturity</td>
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<td>Respect for faculty</td>
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<tr>
<td>Respect for students</td>
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</tbody>
</table>

If you wish to make additional remarks, please do so here or on an attached sheet:

In light of the above, please check one:

☐ I recommend this applicant without reservation  ☐ I have minor reservations about this candidate
☐ I do not know the applicant well enough to recommend  ☐ I do not recommend this applicant

Name: ___________________________ Subject taught: ___________________________
Institution: ___________________________ E-mail address: ___________________________
Signature: ___________________________ Date: ___________________________

Please return this form to the student in a sealed envelope, signed across the flap. If you prefer, you can scan and e-mail it to chinesecamp@gonzaga.edu, or you can mail it to: Gonzaga University Startalk Program, Department of Modern Languages, AD Box 44, Spokane, WA, 99258.