

UNIVERSITY OF UTAH B DEPARTMENT OF PHYSICS PERSONAL REFERENCE

This form is to be completed by the Applicant and an Endorser and returned to: The University of Utah
Department of Physics
115 South 1400 East, Room 201
Salt Lake City, UT 84112-0830
USA

PART I B To be completed by the Applicant

Applicant-s Name: _____ Department: _____ Degree Sought: _____

I waive (), I do not waive () my right to have access to this Personal Reference Form. _____
Signature of Applicant

Please list courses taken with the professor filling out the reference:

Course Number	Course Title	When Taken	Grade

Please give other personal contacts with person giving reference: _____

To the Endorser:

The applicant named is applying for an award or financial assistance from the University of Utah Graduate School. The applicant-s intended area of study at the University of Utah is _____. The applicant has listed you as a reference. Would you please complete this form and return it to the address listed at the top of this page.

PART II B To be completed by the Endorser and sent directly to the Physics Department at the address listed above.

(If you do not know the student well, feel free to say so; such frankness will not prejudice the candidate-s chance for acceptance.)

1. I do () do not () know the student-s academic abilities well enough to give the applicant a recommendation.
2. Summary evaluation: Overall scholarly ability. In comparison with a representative group (see not below) or students in the same field who have had approximately the same amount of experience and training, how do you rate the applicant in GENERAL ALL-AROUND SCHOLARLY ABILITY?

Please check educational level of representative group with whom the applicant is compared:

() College Junior () College Senior () First Year Graduate Student () Advanced Graduate Student

- () Truly exceptional Equivalent to the very best you have known B a person who, in you experience, appears only every few years.
- () Outstanding Comparable to the best student in current class. Highest 5%.
- () Unusual Next highest 5%.
- () Good Ability easily identifiable, but not in upper 10%. Probably upper 15%.
- () Above average Probably upper 25%.
- () Average Upper 50%.
- () Below average Lower 50%, but recommended.
- () Not recommended for graduate study.

3. Some gifted individuals make mediocre scholastic records. In your opinion, is the applicant's scholastic record, as you know it, an accurate index of his/her scholastic ability? () Yes () No () Don't know. If your answer is No, please explain briefly, possibly giving consideration to the applicant's performance in independent study or in research participation programs.

4. Do you know of any matters related to character and responsibility or to physical and mental health which should be considered in planning for the student's graduate work?

5. What is your estimate of the applicant's promise as a graduate student? (Give views on such matters as previously accomplishments, intellectual independence, capacity for analytical thinking, ability to work with others, ability to organize and express ideas clearly, both orally and in writing, drive and motivation.)

6. I would () I would not () be pleased to have the applicant working under my direction as a
() Research Assistant
() Teaching Assistant
() Teaching Fellow.

Signature _____ Date _____

Name printed or typed _____ Title _____

Institution & Address _____

Please return this form to the address listed at the top of the first page.