To be completed by the Applicant

Applicant’s name: _________________________________________
Name of program: _________________________________________
Reference requested from: __________________________________

Professors may refuse to write a recommendation if you do not waive your right to see it. All signed reference forms will be held in strict confidence. If you waive your right to inspect the information requested by this form, please sign below.

___________________________________________________________________________________________________
Applicant’s signature          Date

To Be Completed by the Faculty Member Providing the Reference

Please attach and sign a letter that answers the following items to the best of your ability.

1. How long and in what capacity have you known the candidate?

2. Please comment on the following:
   • Your evaluation of the applicant’s academic strengths and weaknesses.
   • Applicant’s ability to live abroad and handle cross-cultural challenges.
   • How this program will directly benefit this applicant’s goals or development.
   • Any other factors that you believe might influence successful completion of this program.

Please complete and place in a signed and sealed envelope. Please have the applicant pick-up your reference, so that they may include it with their complete UVM Exchange Application.

Your reference will aid in the selection of nominated students participating on this exchange and will be included in your students’ partner institutions application materials (if selected).