

2023 Health Science Enrichment Workshop

Faculty or Teacher Recommendation for Admittance into the 2023 Workshop

Applicant Name (please print): _____

I hereby waive my right to have access to this recommendation form.

Applicant Signature _____ Date _____

1. Rate this individual in terms of the qualities listed below by checking the appropriate spaces.

Characteristics	Superior	Good	Fair	Poor	No Basis for Judgment
Intellectual Ability					
Accountability					
Emotional Stability					
Attitude					
Motivation					
Ability to Get Along with Others					
Ethical Behavior					
Self Confidence					
Maturity					
Initiative					

Comments _____

2. Do you have confidence in this individual's integrity? ____ Yes or ____ No

Explain Briefly _____

3. Indicate below your overall recommendation of this individual.

_____ Recommend
_____ Do Not Recommend

Comments _____

Signature _____ Date _____

Printed Name _____

Please upload online with your application, unofficial transcripts, and essay.

*Note: Applicant, please upload this recommendation form with the 2023 Health Science Enrichment workshop online application.