International Center
University of Missouri

Study Abroad Recommendation Form

Applicant Information (to be filled out by student)

Name:_____ MU Student #_____

Program for which you are applying: _____

Term(s) and Year: ☐ January Intersession 20_1_ ☐ Spring 20_ _ ☐ Summer 20_ _ ☐ Fall 20_ _

☐ Academic Year 20_ _- 20_ _

Application Deadline:_____

Study Abroad Advisor: _____
name

Under the Family Educational Rights and Privacy Act of 1974, as amended, students have a right to certain education records. I hereby waive my right of access to this evaluation and any accompanying letter of recommendation. I understand that this evaluation will be used only for the purpose for which it was prepared. ☐ Yes ☐ No

_____ _____

Signature of the Applicant *Date*

To the Professor/Instructor Completing this Form:

The student named above has listed you as a person able to provide an evaluation of her/his qualifications for an academic study abroad program offered by the International Center at the University of Missouri . Students are selected for study abroad on the basis of academic performance, maturity, flexibility and a strong sense of purpose. It is important to the student and to the University that we select only those students who are likely to succeed in and benefit from this program. We appreciate your candid opinion as to the applicant's qualifications.

The student's application cannot be processed until references are returned. The applicant has listed the study abroad application deadline, and we would appreciate it if you could provide the student with your recommendation before that time. Please return this form and your attached letter in a sealed envelope with your signature over the seal directly to the student, who will then be responsible for submitting the letter with his/her completed application. The recommendation will be reviewed by the MU Study Abroad Selection Committee and by the foreign institution to which the student has applied.

Please write your name, title and department information in the spaces below:

Name: _____

Title: _____ Department: _____

Office Address: _____

Office Phone: _____

Please attach a letter to this form addressing the following:

1. How long and in what capacity have you known the applicant?
2. What do you feel are the applicant's academic/intellectual strengths and weaknesses relevant to study abroad?
3. What is your understanding of the applicant's motivation for studying abroad and do you feel that her/his goals are laudable, realistic and attainable?
4. Do you feel that the applicant would be a good representative of MU abroad? Why or why not?
5. Please feel free to include any other information or insights that you feel would be relevant to this student's application for study abroad.

Thank you very much for your time and consideration!