

**THE ISTS / NEUKOM INSTITUTE INTERNSHIP PROGRAM**  
**LEAVE-TERM FUNDING RECOMMENDATION**

**Applicant (print):** \_\_\_\_\_

**Recommender (print):** \_\_\_\_\_

This form, its instructions and the subsequent letter of recommendation may be used in application to internship and fellowship funding programs administered by the **Tucker Foundation**, the **Rockefeller Center**, the **Dickey Center**, **ISTS/Neukom Institute** and **Career Services**. Please deliver this form and your recommendation letter by giving it to the student in a sealed envelope or by sending it directly to the appropriate office(s), checked below.

---

**To be completed by the applicant:**

I waive \_\_\_ do not waive \_\_\_ any right I may have to read or obtain copies of the recommendation. I am receiving from Professor \_\_\_\_\_.

Centers to which I am applying for funding (check all that apply):

\_\_\_ **Tucker Foundation** (To: Fellowships & Internships, Tucker Foundation, HB 6154, Fax: 603.646.2645)

\_\_\_ **Rockefeller Center** (To: Internships, Rockefeller Center, HB 6082, Fax: 603.646.1329)

\_\_\_ **Dickey Center** (To: Internships, The Dickey Center, HB 6048, Fax: 603.646.2168)

\_\_\_ **Career Services** (To: Internship Funding, Career Services, HB 6208, Fax: 603.646.1630)

\_\_\_ **ISTS/Neukom Institute** (To: Internships, ISTS, HB 6211, E-mail: info.ists@dartmouth.edu)

Due date for the recommendation to be received at the appropriate office: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

---

**To be completed by the applicant's reference:**

Please complete this form and attach a letter of recommendation, commenting on the appropriateness of the proposed internship to the applicant. Your estimate of how the project may enrich this student's undergraduate work will greatly help the selection committee to assess the strength of the proposal. The letter should address:

- (a) How long and under what circumstances have you known the applicant?
- (b) Describe the applicant's strengths and weaknesses.
- (c) How would this internship enrich the student's academic pursuits?
- (d) How does the applicant respond to stressful situations? To decision-making situations?
- (e) Please comment on the following characteristics:

Leadership, Dependability, Ability to work with others, Initiative, Tolerance, Flexibility

- (f) How would you rate this applicant as a student intern?

\_\_\_\_\_ Outstanding, more than qualified

\_\_\_\_\_ Good, better than many

\_\_\_\_\_ Weak, should be discouraged

Signature of Recommender: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Work): \_\_\_\_\_ (Home): \_\_\_\_\_

Relationship to student: \_\_\_\_\_

---

**NOTE: Internship and fellowship applications, including all recommendations, must be complete for a student to be considered for funding.**