

Center for Middle Eastern Studies

Foreign Language and Area Studies (FLAS) Fellowship LETTER OF RECOMMENDATION FORM

APPLICANT WAIVER STATEMENT

THE UNIVERSITY

Before giving this form to your referee, please complete the following statement in accordance with the Family Education Rights and Privacy Act.

l,		(applicant name) have applied for the
(Summer Academic	Year) FLAS Fellows	ship offered by the University of Arizona's Center for Middle
Eastern Studies for:	(level)	(language).

I hereby waive access to this recommendation letter. 🛛 YES 🗌 NO

I also understand that it is my responsibility to ensure this form is delivered to CMES by _____

(type in application deadline date)

DATE:

APPLICANT SIGNATURE: _____

INSTRUCTIONS FOR REFEREE

Please give your frank assessment of the student's academic abilities, especially as they relate to the pursuit of Middle Eastern languages and area studies. Please indicate how well, how long, and in what context you have known the applicant. If the award is to be used for an intensive overseas program of study, address the applicant's psychological preparedness, flexibility and maturity for such study.

Attach your letter of recommendation on your departmental letterhead to this form. You may give the applicant your letter in a sealed envelope, or send the letter directly to: *FLAS Coordinator, UA Center for Middle Eastern Studies, Marshall Building Room 470, 845 N. Park Avenue, Tucson, AZ 85721.*

The letter of recommendation must be received by

If you have questions about this form, please contact CMES at 520-621-5450 or sbs-cmes@email.arizona.edu

			REQUIRED REFEREE INFO	
Full Name:		Position:		
Department:				
Address:				
City:	State:	Zip:	_ Telephone	
e-mail address:				
Signature:			Date:	