

**National School of Tropical Medicine**  
**Baylor College of Medicine**  
One Baylor Plaza, BCM113 | Houston, Texas 77030  
713-798-1199 | fax 713-798-2299 | [tropmed@bcm.edu](mailto:tropmed@bcm.edu)



**NSTM Diploma in Tropical Medicine Program**  
**Recommendation Letter Request Form**

**To the Student:**

I consent to the release of any information from my education record (e.g. grades, GPA) that is deemed appropriate for purposes of the recommendation or evaluation.

Further, I hereby:  *waive*  *do not waive* my right to see the recommendation at any time in the future.

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To the Evaluator:**

This student is requesting that you write a letter of recommendation on their behalf for admittance into the Diploma in Tropical Medicine program at Baylor College of Medicine. Please complete the evaluation matrix on the next page and write your candid evaluation of this student IN A SEPARATE DOCUMENT.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Then send this form with your letter of recommendation to:

Academic Coordinator  
Baylor College of Medicine  
One Baylor Plaza, BCM 113  
Houston, Texas 77030  
May submit via email to: [tropmed@bcm.edu](mailto:tropmed@bcm.edu)

Recommendation may also be given to student applicant in a sealed envelope signed on the flap by authorized sender to ensure security. Student can then send envelope with other materials to the above address to complete application process.

On behalf of the student and the NSTM Review Committee, we thank you.

**Evaluation Matrix:**

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Applicant Name (Last, First)

**How would you rate the applicant for each of the following characteristics? Please select the rating that best describes the applicant in each category.** Select “Not Observed” if you have not had an opportunity to evaluate the characteristic or have no basis for assessment.

	Superior Top 5%	Excellent Top 10%	Good Top 20%	Average 30%-50%	Below Avg. > 50%	Not Observed
<b>Leadership:</b> Takes initiative and motivates others.						
<b>Ethics:</b> Displays honesty, integrity, and ethical behaviors.						
<b>Reliability:</b> Dependable, responsible, prompt, and thorough.						
<b>Judgment:</b> Displays critical thinking skills, common sense, and decisiveness.						
<b>Oral Communication:</b> Speaks clearly with precision and accuracy, without ambiguity.						
<b>Written Communication:</b> Writing is precise, accurate, grammatically correct, and unambiguous.						
<b>Interpersonal Relations:</b> Considerate, sensitive, tactful in response to others, and able to get along well with peers.						
<b>Adaptability:</b> Reacts well to stress, is poised and controlled.						
<b>Research:</b> Ability to do research, either individually or as part of a team.						
<b>Quantitative Ability:</b> Familiar with statistical and/or mathematical concepts and their use in practical applications.						
<b>Promise as a Public Health Professional:</b> Demonstrates passion in field, goals are realistic.						
<b>Overall Intellectual Ability:</b> Aptitude for statistical and/or mathematical concepts and their applications.						

Recommendation concerning admission:

- |                                                                      |                                                                                 |
|----------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input type="checkbox"/> I recommend this applicant with enthusiasm. | <input type="checkbox"/> I recommend this applicant but with some reservations. |
| <input type="checkbox"/> I recommend this applicant with confidence. | <input type="checkbox"/> I am not able to recommend this applicant.             |
| <input type="checkbox"/> I recommend this applicant.                 |                                                                                 |

Sign and Date: \_\_\_\_\_