## Graduate Fellowships Letter of Recommendation Cover Form

	rivately Endowed Fellowship 🛛 🗍 Graduate Research Men			ntorship	
	Graduate Summer Research Mentorship	entorship Dissertation Year Fellowship			
Ap	olicant Name (last, first, middle)				UID
Stu	dent Affairs Officer		De	partment	
here Info	derstand this letter of evaluation is to be receive by expressly waive any and all rights I might h rmation Practices Act of 1977, and any or all oth t to inspect and review this letter; the right to have	ave to access this evaluati er laws, regulations or polic	ion un ties. I	der the Family Education Rights understand that the rights I am	and Privacy Act of 1974, the California waiving include, but are not limited to, the
	I agree to waive access to this statement	I do not agree to v	waive	access to this statement	
Sigr	nature	D	ate		
<b>lec</b>	ommender Complete and sign this section	on. Unsigned forms will	not b	e reviewed.	
Ι.	I have known the applicant for a period of		6.	<ul> <li>What is the degree progress of the applicant compared to others in the same program?</li> <li>Ahead of average (Projected time-to-degree is one year or more ahead of about 70% in program)</li> </ul>	
	years and/or months.				
2.	I have known the applicant as (check all that apply) an undergraduate employee			Average (Projected time-to-degree is the same as about	
	a graduate student other (spec	ify)		70% in program) Donger than average (Projected time-to-degree will extend for	
				one year or longer than about 70% in program)	
	The applicant worked with me as (check all that apply)			Applicant is a first-year student; unable to gauge	
	a teaching assistant other (specify) a research assistant		7.	<ol> <li>For GRM &amp; GSRM applicants only: I will meet with the applicant during the tenure of the award</li> </ol>	
4.	I served as the applicant's (check all that apply)			once per week	less than once per week
	academic advisor       teacher in several classes         department chair       other (specify)			twice per week	(please explain)
				more than twice per we	ek
	teacher in only one class		8.	Ear Dissertation Year Fe	llowship Applicants Only: Degree
5.	Please indicate the strength of your overall endorsement of this applicant		5.	For Dissertation Year Fellowship Applicants Only: Degree Completion: Based on your judgement, please indicate the likelihood that this applicant will complete the dissertation within the award year.	
	Truly exceptional (top 1%) Good	(top 25%)		Absolutely Certain (100	%) Dossible but Not Likely (40%)
	Excellent (top 5%)	ge (top 50%)		Almost Certain (80%)	Not Very Likely (0-39%)
	Very good (top 10%)	average (lower 50%)		Strong Possibility (60%)	
sign wisł acco <b>Res</b>	se return a signed original of this form and of y ature across the back flap. In the letter, please to discuss the applicant's unique academic str omplishments, and career goals after receiving earch Mentorship (GSRM), please also disc paper that will be completed. GRM & GSRM fac	describe the circumstance ength, scholarly publicatio the degree. <b>For the Gra</b> c cuss the mentoring activiti	es und ons, suo <b>duate</b> es that	er which you discovered the a ccess in meeting degree-progre <b>Research Mentorship (GR</b> will take place during the ten	pplicant's academic potential. You may ess timelines, professional <b>M) and Graduate Summer</b> ure of the award as well as the project
OI P					
-	nt Name			Email Address	