



McNAIR SCHOLARS PROGRAM

UW McNair Scholars Recommendation Form

Project Year 2020-2021

TO BE COMPLETED BY RECOMMENDER

Due:

The student waived their right to see this letter of recommendation.

1. Faculty 2. Other employees of a college or university 3. Former employers (listed in order of preference)

Student's Name: _____

Recommender's Name and Title _____

* How long have you known the applicant? _____

* In what capacity have you known the applicant? _____

* How would you rate this applicant in terms of the characteristics listed below?

CHARACTERISTICS	In the best 5%	In the upper 10% but not Best 5%	Above average But not in the Best 10%	Average	Below Average	Other comments
Potential for Graduate Work						
Intellectual Potential						
Research Aptitude						
Ability to work with others						
Maturity						
Written communication						
Oral communication						
Present academic performance						
Perseverance						

On a separate sheet, please provide a **LETTER OF RECOMMENDATION** that includes specific examples of observed behaviors that relate to the applicant's promise as a future graduate student.

Signature _____ Institution _____ Address _____

Name and Title _____ Phone Number _____ Date _____

Thank you!

PLEASE SUBMIT TO:

McNair Scholars Program
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Dept. 3808, 1000 E University Ave.
Laramie, WY 82071
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E-Mail: mcnair@uwyo.edu