Study Abroad Application
SHORT-TERM ACADEMIC REFERENCE FORM

Name of Applicant _______________________________________________________________________

Reference Requested From _______________________________________________________________________

Program Name: ______________________________________________  Semester ____________________ 20___

NOTIFICATION OF CONFIDENTIALITY  Under US federal law (Section 438 of Public Law 90-247, as amended), students are permitted access to certain educational records. Section 438(a)(2)(B) provides that a student may waive the right to inspect confidential letters of recommendation. Many applicants have found that recommendation letters may have a greater effect when such letters are written in confidence. If you waive your right to inspect the information requested by this form, please sign below.

_________________________________________________________     ____________________________
Signature                                             Date

To be completed by the Referee

To the referee: The above student is applying for study abroad. Since participants serve as representatives of their nation and institution, we are concerned with both academic excellence and personal suitability of applicants for study abroad. The willingness of the host institution to accept future applicants will be affected by the candidate’s performance.

Please type or print clearly. Return this reference form within seven days of receiving it to: UNC Asheville Study Abroad Office, 28 Ramsey Library, CPO# 1560, One University Heights, Asheville NC 28804.

Since participants serve as representatives of their nation and institution, we are concerned with both academic excellence and personal suitability of applicants for study abroad. Please answer the following questions (on separate sheet if necessary) and return this reference form within seven days of receiving it to: UNC Asheville Study Abroad Office, 28 Ramsey Library, CPO# 1560, One University Heights, Asheville NC 28804.

1. How long and in what capacity have you known this student?

2. How does this student work through uncomfortable or challenging situations?

3. How does this student collaborate in a group environment?

4. Please share your knowledge of student’s ability to embrace differences.

_________________________________________________________     ____________________________
Faculty Signature                                             Date