

**RECOMMENDATION FOR THE RONALD E. MCNAIR PROGRAM
UNIVERSITY OF DELAWARE**

Program Description: The McNair Program provides a comprehensive array of services designed to facilitate undergraduate degree completion and ultimate enrollment in graduate school at the doctoral level. Talented students will partake in a summer and/or an academic year research project with a Faculty Mentor, attend a graduate school preparation seminar series, and prepare for the GRE. They will begin their research during the summer, culminating in the presentation of their research to students, faculty, and staff. Students will receive a stipend during their program participation.

Waiver of Confidentiality Rights by applicant.

I have asked _____ to complete a recommendation for me in support of my application to the Ronald E. McNair Program. I hereby waive my right to inspect the comments which appear on this form and attachments of continuation. I understand I am not required to waive that right as a condition for admission.

Student Name (printed) _____ Student Signature _____

If the student does not sign the above waiver statement, he or she has the right to access this form.

How long and in what capacity have you known the applicant? _____

PART I

PLEASE RATE THE APPLICANT'S OVERALL ACADEMIC PROMISE, COMPARING THEM TO ALL OTHER STUDENTS WITH WHOM YOU HAVE HAD CLOSE CONTACT AT THE SAME STAGE IN THEIR ACADEMIC CAREERS.

Within the top 10% ___ Within the top 20% ___ Within the top 30% ___ Other (specify) _____

MAXIMUM POTENTIAL FOR GRADUATE STUDY

___ B.S. (unlikely to complete M.S.) ___ MS certainly (possibly Ph.D.) ___ Ph.D. (definitely)
___ Inadequate opportunity to evaluate

PART II

PLEASE DESCRIBE THE APPLICANT BY ATTACHING A TYPED LETTER OF RECOMMENDATION. YOUR LETTER OF RECOMMENDATION MAY INCLUDE YOUR ASSESSMENT OF THE STUDENT'S ABILITY TO:

- Think analytically
- Conduct research
- Be responsible and mindful
- Communicate (verbal/written)
- Take initiative and work independently
- Succeed at the graduate level
- Manage multiple academic and extracurricular commitments
- Contribute to a collaborative learning community like the McNair Scholars Program.

YOUR RECOMENDATION FOR THE APPLICANT'S ADMISSION FOR THE PROGRAM

Highly recommended___ Recommended___ Recommended with reservations_____
Not recommended_____

RECOMMENDOR'S NAME_____

E-Mail_____

DEPARTMENT_____

TITLE_____

ADDRESS_____

PHONE_____

Would you like more information about the McNair Program? ___ Yes ___ No

Are you interested in serving as a Faculty Mentor to a McNair Scholar?
___ Yes ___ No

THANK YOU FOR YOUR RECOMMENDATION

PLEASE RETURN THIS FORM TO:

Program Director, Ronald E. McNair Program, 180 S. College Ave, Newark DE 19716 or
email mcnairscholars@win.udel.edu