



Faculty Recommendation Form

Fayetteville State University

Research Initiative for Scientific Enhancement (FSU-RISE) program

Applicants to the FSU-RISE program are required to submit recommendations from two professors with at least one from a science professor.

To be completed by the applicant. Please type or print.

(Last Name) (First Name) (MI)

I waive or do not waive the right to review this recommendation:

(Signature of Applicant) (Date)

To be completed by the evaluator – this form may be submitted by fax or electronically (see contact information below) or may be given to the applicant in a sealed, signed envelope to be included with their application packet.

Fayetteville State University Research Initiative for Scientific Enhancement (FSU-RISE) is a project federally-funded by the National Institute of Health and Human Services (NIHHS) with the overall goal to increase the number of minority students entering graduate programs in the biomedical sciences. Students are eligible to participate in RISE beginning the sophomore year with at least a 2.8 cumulative GPA. Scholars will participate in three full years of structured educational pipeline activities leading to graduate school including participation in hands-on Biotechniques or Biopsychology Workshops; Enrichment Seminars; faculty-mentored intramural and extramural research; Scientific Communications and interdisciplinary research courses; local and national research symposia and conferences; and a full Graduate Record Examination (GRE) preparatory workshop. Students must be serious, mature, responsible, and committed to completing all aspects of the program. Participants are paid \$12-13.50/hr for 10-20 hrs of participation per week.

1) Name of Evaluator: _____

Please rate the applicant for the following characteristics

Characteristic Evaluated	Upper 10%	Upper 25%	Upper 50%	Lower 50%	No Basis for Judgment
Academic Ability					
Basic laboratory skills					
Interest in pursuing masters or Ph.D. degree					
Interest in pursuing a professional health degree					
Motivation and initiative					
Ability to work with others					
Dependability/ Commitment					
Ability to accept constructive criticism					
Resourcefulness and originality					
Enthusiasm					
Integrity					
Work Ethic					
Overall Evaluation					

2) I have known the applicant for approximately _____ years. My relationship to the applicant was (is) in the following capacity: _____ Faculty advisor _____ Faculty _____ Employer _____ Other (please specify): _____

3) I know this applicant: _____ very well _____ fairly well _____ only casually

4) Does the applicant possess any special assets that should be noted?

5) Does the applicant demonstrate any weaknesses that you feel would hinder his/her success in this summer program?

6) Other comments – please include your assessment of this applicant’s interest in and motivation for pursuing a career in basic science.

Recommendation concerning admission (check one): I _____ highly recommend _____ recommend _____ recommend with reservation _____ cannot recommend this applicant

Signature of evaluator

Date

Name

Title and Affiliation

Email address

Telephone

Please feel free to add a letter of reference to this form if you would like. Thank you for providing this recommendation. This recommendation may be submitted by the below methods:

- 1) Email to Jraynor@uncfsu.edu
- 2) Fax, to Attn: Mrs. Cathy Baldwin at (910) 672-2152)
- 3) Hard copy, in a sealed signed envelope, may be given to the applicant to be included in his/her application packet. If you choose this method, we would appreciate an electronic copy as well, if possible.