PART III
FACULTY RECOMMENDATION
(To be completed by the student)

FALL 2016 ☐ SPRING 2017 ☐ FULL YEAR 2016-17 ☐ FULL YEAR 2016-17 ☐
(same program) ☐ (different programs)

Student's name: ________________________________
Major department(s): ________________________________
Correlate(s): __________________________________________
JYA Program __________________________________________
Proposed Country of Study ________________________________

TO BE COMPLETED BY THE FACULTY MEMBER

Recommender's name: __________________________________

1. Please list the courses in which you have taught the student, including course number and title:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. How well do you feel that you know this student, personally and academically?

Personally: ☐ Very well ☐ Sufficiently to recommend ☐ Not well

Academically: ☐ Very well ☐ Sufficiently to recommend ☐ Not well

3. How well has the student acquainted you with the details of his/her academic plans for study abroad

☐ Very well ☐ Sufficiently to recommend ☐ Not well

4. From your conversations with this student, do you believe that his/her interest in JYA is more academic or personal?

5. Do you believe that study abroad will benefit the student's academic program at Vassar?

☐ Yes ☐ No (If no, please give details on the following page.)

6. Based upon what you know of this student's plans and the college's guidelines for study abroad, how strongly would you recommend approval of this student's study abroad plans?

☐ Without reservation ☐ With reservations (please specify on the next page) ☐ Do not recommend

Please return the completed form by Friday, December 11, 2015 to the Office of International Programs, MN 173 or mail to Campus Box 730
7. Please comment on specific areas of strength or weakness, either academic or personal, that the Committee on Leaves and Privileges should consider while reviewing this student’s application. Attach a separate sheet of paper if more room is needed.

Name: (please print) __________________________  Title: __________________________

Signature: __________________________  Date: __________________________

**Please note:**
This confidential evaluation will not become part of the student's permanent record and will be destroyed after the JYA deliberations. In addition, **please keep a copy of this recommendation for future use.** Because of legal restrictions, the Dean of Studies Office cannot duplicate these in-house comments for distribution to other institutions or foreign study programs. Thus, the student may ask you to write a formal recommendation when applying to the foreign program or university itself.