



Wells College in Florence Recommendation Form

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Wells College

To the Applicant: Please give this form to the reference you select and include for convenience a stamped envelope addressed to Amy Torea, Program Coordinator, Wells College in Florence, Wells College, 170 Main Street, Aurora, NY 13026.

Applicant's Name _____

Fall Spring Academic Year

Name of Academic Reference _____

Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this evaluation, and I understand that this evaluation will be used only for the purpose for which it is prepared. Yes No

To the Academic Reference: The above named student is applying for admission to the Wells College Program in Florence. Your evaluation of the applicant's candidacy is essential for her/his acceptance into the program. If you prefer to respond in the form of a letter, please feel free to do so.

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

2. On a scale of 1 (low) to 5 (high), how would you rate the applicant's

Stamina 1 2 3 4 5 Ability to take initiative 1 2 3 4 5

Intellectual curiosity 1 2 3 4 5 Ability to work alone 1 2 3 4 5

Motivation to learn 1 2 3 4 5 Ability to work in a team 1 2 3 4 5

3. How do you rate (1-5) the applicant's maturity and emotional stability?

Maturity 1 2 3 4 5 Emotional Stability 1 2 3 4 5

4. How do you expect the applicant to adapt to educational and cultural differences?

5. Please write any additional comments you would like to make about the applicant on the back.

6. If you were responsible for a study abroad program would you be eager to accept the applicant? Why or why not?

7. I strongly recommend the applicant

I recommend the applicant

I recommend the applicant with reservations

I do not recommend the applicant

Name and Title _____ Signature and Date _____

Institution _____ Address _____

**SUBMIT YOUR RECOMMENDATION TO
Amy Torea, Program Coordinator
Wells College in Florence
Wells College, 170 Main Street
Aurora, New York 13026**