REFERENCE INFORMATION FORM

Name of applicant: _____________________________________________________

(If you choose not to sign this waiver, you will have access to this document in accordance with the Family Educational Rights and Privacy Act of 1974).

I hereby voluntarily waive my right to inspect this confidential personal reference:

____________________________________________________________________

Signature

The applicant should provide all information up to this point, only.

Name of respondent: __________________________________________________

Title: ______________________ Institution: ________________________________

How long have you known the applicant?: __________________________________

In what capacity have you known the applicant?: _____________________________

The applicant has applied for a GraSUS Fellowship at North Dakota State University. Information about the GraSUS program is available at www.ndsu.edu/grasus.

Either on the back of this form or on a separate letter, please provide a reference on behalf of the applicant. Of particular importance to us will be your perceptions of the applicant’s instructional potential, his/her commitment, reliability and integrity, and an assessment of the applicant’s interpersonal and academic skills.

Signature of respondent: _____________________________    Date:__________________

Please submit your letter to arrive at the following address no later than April 21st, 2010:

Center for Science & Mathematics Education-FLC 314B
Attn: Kim McVicar
NDSU Dept 2780
PO Box 6050
Fargo, ND 58108-6050