



► To be completed by the Referee:

We are grateful for your assistance on behalf of this applicant. Please complete this form promptly, sign and date it, scan it, and e-mail it directly to Kelly Carothers at SRIMS@marshall.edu.

1. Applicant Name:

Applicant Email:

2. How long have you known the applicant?

In what specific capacity?

Characteristic	Outstanding (Top 5%)	Excellent (Top 10%)	Above Average (Upper 25%)	Average (Upper 50%)	Below Average (Lower 50%)	No Basis for Judgement/ Unknown
Maturity						
Independence, Initiative						
Communication Skills						
Disciplined Work Habits						
Motivation for science						

3. Please provide additional comments below or via a letter on official letterhead with your signature.

Signature of Reference:

Date:

Phone:

Email:

Print Name, Organization/Institution, and Title:

Mailing Address: