



**SOUTH DAKOTA STATE UNIVERSITY
STUDY ABROAD APPLICATION
CONFIDENTIAL REFERENCE FORM**

Part I: To be completed by the applicant.

Name of Applicant _____

Date of Request _____

SDSU Study Abroad Program:

Country:

City:

University:

Evaluator's Full Name _____

Position _____

DEADLINE DATE FOR REQUEST _____

U.S. law permits students access to certain educational records such as letters of reference. Applicants often find, however, that a confidential letter of reference will be more persuasive than one to which the applicant has access. If you, the student, wish to waive your right of inspection of this reference, please sign and date below:

Applicant's Signature

Date

PART II: TO BE COMPLETED BY EVALUATOR.

The applicant mentioned above is applying for a study abroad program through the SDSU Office of International Programs. To help us in determining the applicant's suitability for the experience of study abroad, we need your assistance in assessing his/her academic work and emotional/social maturity.

Please return this form to the student in a sealed letterhead envelope, with your signature written across the flap.

1. Please indicate the basis and extent of your acquaintance with the applicant.

2. Please indicate the applicant's academic and personal attributes:

	Excellent	Good	Fair	Poor	No opportunity to observe
Competence in major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic interest and motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for independent thought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability in speaking and writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to adapt to new or unstructured circumstances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-reliance/independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to relate to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open-mindedness (ability to deal with diversity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please indicate your frank assessment of this applicant's ability to succeed in a study abroad program, both academically and non-academically. Focus your attention on the applicant's suitability for study abroad, how study abroad might benefit the applicant, and any strengths and weaknesses you think this applicant has which will affect the study abroad experience. **Please use an additional sheet if required.**

Evaluator's Signature _____ Date _____

Print Name _____ Position/Title _____

Campus Address _____ Telephone Number _____

E-mail address _____