

**Letter of Recommendation for the NSF REU Program: EXPLORE IT! BUILDING THE NEXT  
GENERATION OF SUSTAINABLE ENERGY RESEARCHERS,  
2009 FBRI REU Program, 5737 Jenness Hall, The University of Maine, Orono, ME 04469-5737  
Telephone: (207) 581-1431 Email: Cynthia\_Growe@umit.maine.edu**

*This section to be filled in by applicant. (Please print or type.)* SS/ID# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month / Day / Year

\_\_\_\_\_  
Last Name First Name Middle Name

The Family Education Rights and Privacy Act of 1974 (P.L. 93-380) gives students access to information in their application files. However, to ensure that references will be free to write a candid letter of recommendation, an applicant may waive the right to see letters of reference. If you wish to voluntarily waive this right, please sign below:

Signature \_\_\_\_\_ Date \_\_\_\_\_

To be completed by recommender and returned directly to the FBRI REU Program, The University of Maine

What is your estimate of the applicant's promise as an undergraduate research student and promise of professional success? What are the applicant's greatest strengths and weaknesses? Please state the extent of your acquaintance with the applicant. If possible, please compare the student with any others in the same field at a similar stage in his/her career. Please give your evaluation of the applicant's qualifications for a studentship. If you prefer to write a personal letter rather than use this form, please feel free to do so, and attach your letter to this form/email in addition to this form.

Summary Evaluation: In comparison with a representative group of students in the same field who have had approximately the same amount of experience and training, how do you rate the applicant in:

	BELOW AVERAGE	AVERAGE	SOMEWHAT ABOVE AVERAGE	GOOD	UNUSUAL	OUTSTANDING	TRULY EXCEPTIONAL	UNABLE TO JUDGE
	Lowest 40%	Middle 20%	Next 15%	Next Highest 15%	Highest 10%			
Academic Ability and Potential for Research Work								
Motivation for the Proposed REU Program								

\_\_\_\_\_  
(Signature) (Title)

\_\_\_\_\_  
(Name – Please Print or Type) (Institution)