



STUDY ABROAD PROGRAM

StudyAbroad@iona.edu

RECOMMENDATION FORM

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Study Abroad Program: POLAND – SPRING 20

Recommender's Name: \_\_\_\_\_

Please (briefly) describe the recommender's relationship to the student (professor, employer, etc.): \_\_\_\_\_.

Please indicate your opinion of the student in the following areas by marking the box next to the appropriate description.

Table with 6 columns: 5 (Best), 4, 3, 2, 1 (Worst) and rows for Attendance, Punctuality, Effort, Enthusiasm, Quality of Work, Responsibility, Integrity, Independence, Maturity, Self-Confidence, Ability to Follow Directions.

Please use the lines below to provide any further information or comments regarding this student. Attach a separate sheet if necessary.

Five horizontal lines for providing further information or comments.

Do you recommend that this student participate in Study Abroad? \_\_\_\_\_

Signature of Recommender: \_\_\_\_\_ Date: \_\_\_\_\_

Please place this sheet in an envelope and return it either to the student or to Dr. George Mangiero, Director of Study Abroad. Thank you!