

**CLARK ATLANTA UNIVERSITY
STUDY ABROAD
CONFIDENTIAL REFERENCE FORM**

(Please print the form, complete it, and return it to the Study Abroad Office, Sage-Bacote Hall, Room 323)

Part I - To be completed by applicant

Name: _____

Social Security Number: _____ - _____ - _____ Classification: _____

Under the provision of the Family Educational Rights and Privacy Act of 1974, I waive my right of access to this evaluation, and I understand that this evaluation will be used only for the purpose for which it was prepared. _____ Yes _____ No

Part II - To be completed by evaluator

The student named above is applying to study abroad. We would like your honest assessment of the applicant's attributes with which you are familiar.

For how long and in what capacity have you known the applicant:

Academic Attributes:

	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>	<u>Did not Observe</u>
Competence in major or specialization	_____	_____	_____	_____	_____
Academic interest and motivation	_____	_____	_____	_____	_____
Capacity for independent study	_____	_____	_____	_____	_____
Capacity to meet obligations on time	_____	_____	_____	_____	_____

Non-Academic Attributes:

	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>	<u>Did not Observe</u>
Ability to adapt to environment	_____	_____	_____	_____	_____
Self-confidence and self-esteem	_____	_____	_____	_____	_____
Ability to relate well to others	_____	_____	_____	_____	_____
Emotional stability	_____	_____	_____	_____	_____
Integrity	_____	_____	_____	_____	_____

Evaluator's Signature: _____ Date: _____

Evaluator's Title: _____

