National Oceanic and Atmospheric Administration Undergraduate Scholarship Programs

Voluntary Reference Form

Professor								
completing form:	(Last Name)	(First Name)	(Middle Name)					
Applicant:								
	(Last Name)	(First Name)	(Middle Name)					
How long and in what association have you known the applicant?								

Compared to other students of comparable age and experience you have known in the last five years, how would you rate the applicant with respect to the following characteristics?

	Below Average	Average	Good	Very Good	Exceptional	No Basis for Judgment
Motivation and persistence toward a productive career						
Imagination and originality of thought						
Ability to work with others						
Independence and self-reliance						
Leadership potential						
Mastery of fundamental knowledge in field						
Ability to communicate (written/oral)						

PAPERWORK REDUCTION ACT INFORMATION

NOAA conducts the Office of Education, Educational Partnership Program, Undergraduate Scholarship Program in order to promote the education and training of students in NOAA sciences. The information contained in this application will be used to select undergraduate students. The information on this form will not be treated confidentially. Public reporting burden for this collection of information is estimated to average 8 hours per application including the time for reviewing the instructions and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to NOAA Office of Education, Educational Partnership Program, 1315 East-West Highway, Silver Spring, MD 20910.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

Add any descriptive comments that will assist in providing a complete picture of the applicant's abilities.

COMMENTS:

Signature:	Date:			
Typed/Printed Name:	Title:			
Department:	Institution/Organization:			
Telephone:	E-Mail:			

Mail application, transcripts, and completed reference forms by February 9, 2008, to:

NOAA/Hollings Scholarship Program Office of Education 1315 East West Highway, Room 10703 Silver Spring, Maryland 20910