

Going to school in another geographical location



## **Faculty Recommendation Form**

## This section is to be completed by the applicant Last Name: First Name: TAMU-CC Student ID#: Address: State: City: Zip: Email: Phone: The Family Education Rights and Privacy Act of 1974 mandates the right got students to be able to inspect and review their educational records. You may, however, waive the rights to see specific confidential leters I hereby waive my right to examine this leter and understand that it will not be shared to me I do not waive my right to examine this leter Failure to sign or indicate waiver status indicated confidentiality by default. This waiver is not required as a conditional for admission to or receipt of any other services and benefits from the McNair Scholars Program Student Signature: Date: This section is to be completed by the recommender The student named above is applying to the McNair Scholars Program at Texas A&M University-Corpus Christi. The program is designed to prepare selected undergraduates for graduate study. The students develop research skills by conducting research under the mentorship of a faculty member and participate in many other activities to help them enroll in a graduate program and obtain a doctoral degree. In what capacity have you known this student and how long? Please estimate the student's potential to achieve a PhD/EdD: Medium High \_\_\_Low Has the student expressed interest/concern to you regards the following items: At ending graduate school Pursuing a PhD/EdD Paying for graduate school

Please rate the applicant in each at ribut					
At ributes/Skills Intellectual Ability	No Basis to Judge	Upper 10%	Upper 25%	Upper 50 %	Lower 50%
Oral Expression					
Writ en Expression					
Motivation/Willingness to Work Hard					
Emotional Maturity					
Dependability					
Creativity					
Open-mindedness					
Self-Confidence					
Research Ability					
Critical Thinking Ability					
Potential for Success in Grad School					
Print Name:		Title:			
Recommender Signature:		Date:			
After you sign, please submit to: mcnair@tamucc.edu					
Thank you!					

Please briefly describe why you think the student would be successful as a McNair Scholar:

Recommender Section continued: