

FACULTY SPONSOR
RECOMMENDATION

Award

Date

Student id

50 University Heights North, Ste 017
four@uvm.edu

Students who apply for funding must have UVM faculty support. We ask that you use this form to evaluate this student's potential to succeed. We use faculty opinion of the student as one very valuable measure of the overall application. Ultimately it is the student's own ability to convey clearly the nature and value of the project that most strongly impacts funding decisions. Please complete this form and add any comments you may feel are relevant at the end of the page. This information will not be shared with the student.

If the student should receive the award, you are agreeing to sponsor that student –provide oversight, feedback, and mentorship; provide information on methodological, ethical, procedural, and university protocols which may apply to the student's work, and help them succeed.

Student Name: _____

Name of award: _____

1) How familiar are you with the work for which this student is requesting funds?

Not at all

Moderately

Extremely

Slightly

Very familiar

Student recently approached
and described project

2) Have you read the student's project description?

Yes

No

3) Have you reviewed the budget with the student?

Yes –Is it reasonable? Yes / No

No

4) Please evaluate the importance of the student receiving this funding in order to achieve the goals outlined in the proposal:

Student could accomplish the goals without funding (e.g., other sources of funds, using library resources, etc.)

Student could accomplish some but not all of the goals without funding

Student would not be able to engage in the proposed project without funding

5) Please list any classes in which you have taught this student (dept and course #/approx. class size):

5a) How would you (briefly) describe the student's academic performance in your class(es)?

6) I have worked with this student outside the classroom:

Yes

No

6a) If yes, in what capacity? For how long?

6b) If no, how do you know this student? For how long?

7) How many students do you believe will apply or have applied for FOUR funding this academic year with you as a faculty sponsor?

7a) Of this number, where do you rank this student in terms of value of the experience for the student?

8) If applicable, compared to other students of yours who have received funding, how do you rank this student?

9) Please rank the student's abilities and characteristics:

a. Perform tasks independent of direct supervision
b. Complete tasks under tight deadlines and with mounting pressures
c. Prioritize responsibilities?
d. Ask for assistance from you?
e. Communicate scholarly interests to a broad audience?
f. Competence in major or specialization
g. Academic interests and motivation
h. Resourcefulness
i. Reliability
j. Academic integrity
k. Personal integrity
l. Rate student's performance on this project to date

10) Please state frankly your opinion of this candidate's chances to successfully complete the project that is described in the proposal. (You may also include any additional information you feel was missing from this form.)

Faculty Name (printed)

Signature (if emailed from UVM account, no signature required)

Date

Please return this form to the director of FOUR (akrolle@uvm.edu) or you may use campus mail. Thank you for supporting undergraduates pursuing scholarship, research, and creative activities at UVM!