BROWN UNIVERSITY

Recommendation Form

Resumed Undergraduate Education Program
Box 1876, Brown University
Providence, RI 02912

Please print or type

Full Name of Applicant

Home Address

Deadline: March 10

Applicant: After you have filled in the lines above, give this form and a stamped envelope to a person who knows you well. If you waive your rights of access to this reference (see instructions), please sign below:

All rights of access conferred by the Family Educational Rights and Privacy Act of 1974 (P.L. 93/380) as amended, or otherwise, to all information and materials of any kind received by the Brown University Resumed Education and Financial Aid Office from any source in connection with this application, are hereby voluntarily waived.

Your signature: ___________________________ Date: ____________

A letter agreeing to the "Statement" above is acceptable in lieu of a signature on this form.

*Respondent: The person whose name appears above has applied to Brown University for admission through the Resumed Undergraduate Education Program. Each applicant is to ask two or three people who have instructed him or her, or who have known his or her work (whether paid or volunteer) during the last five years, to submit letters of recommendation on his or her behalf. To the extent that you are able, please evaluate the applicant in terms of the questions below. If you have no basis for judgment on some of the questions, you may simply make a statement to that effect in the space provided for your answer. If the student has signed the statement above, your reference will be held confidential to the extent permitted by law; if not, the student, if accepted and enrolled at Brown University, may inspect it on request.

You may attach a letter to this form covering the information requested (preferably on official letterhead).

1. How long have you known the applicant, and in what capacity?

2. What do you know about the applicant's reasons for returning to college? For example, does he or she wish to study primarily for personal satisfaction, to prepare for a specific profession, or to complete the bachelor's degree because it is a task left undone? What is his or her ultimate educational goal?

3. Do you feel the applicant's goal is realistic for him or her at this time? Can this goal be appropriately met by study at Brown?

4. What knowledge do you have of the applicant's ability to work independently and to use time efficiently?
5. What do you know of the applicant's intellectual qualities? Would you describe him or her as imaginative, creative, logical, inquisitive, etc.? If you know that the applicant has pursued knowledge or self-development in non-academic settings (through independent study, volunteer work, attending lectures, etc.) please comment on these efforts.

6. Does the applicant have any special strengths or talents? For example, is he or she exceptionally motivated, a leader, a creative artist, or a particularly reliable or resourceful worker? Does he or she have any weaknesses or problems of which we should be aware? What are your impressions of the applicant's character, aims, and values? What are the first words that come to mind to describe this candidate's personality?

7. Please use the space below for any additional comments you might wish to make in support of this application.

8. Please rate this candidate according to the scale provided.

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<th>Below Average</th>
<th>Average</th>
<th>Good</th>
<th>Excellent (top 10%, but not 2 or 3%)</th>
<th>Exceptional (top 2 or 3%)</th>
<th>No Basis for Judgement</th>
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Name & Title ___________________________________________ Employer _______________________________________

E-mail Address _________________________________________ Signature _______________________________________

Telephone ___________________________ Date ___________________________

Please return the completed form by the March 10 deadline to Resumed Undergraduate Education Program, Box 1876, Brown University, Providence, Rhode Island 02912. Thank you for your valuable assistance.