

**University of Kentucky College of Pharmacy
Recommendation Form
Summer 2024 Research Program in Pharmaceutical Sciences**

Please return directly email to:

Ms. Catina Barnes, Summer Research Program

Coordinator catina@uky.edu

A. To be completed by applicant before giving this form to person writing recommendation.

Name of Applicant: _____

Person Providing Recommendation:

Title:

Institution/Employer

The Family Educational and Privacy Act of 1974 gives the student the right to inspect letters of recommendation written in support of applications for admission or fellowship. The law also permits students to waive that right if they choose, although such a waiver cannot be a condition of admission or award.

Please sign one (and only one) of the two statements below:

I hereby waive any right to inspect
this recommendation

If admitted to the Summer 2024 program, I reserve the right to inspect the recommendation submitted by the person to whom this form is being given.

Applicant Signature _____ Date _____

Date

Applicant Signature _____ Date _____

Date

B. To be completed by the person providing the recommendation.

1. I have known the applicant for approximately _____ (months/years).

2. My relationship with the applicant was (is)

Faculty advisor

Course instructor

Employer

Other (specify) _____

3. I know the applicant Very well

Fairly well

Only casually

Please rank the candidate in the following categories, in comparison to his/her contemporaries:

	Poor 0-50%	Fair 50-70%	Average 70-80%	Very Good 80-90%	Outstanding 90-100%	Insufficient Knowledge
Communication Skills	*	*	*	*	*	*
Writing skills in English						
Oral skills in English						
Background Knowledge	*	*	*	*	*	*
Overall academic ability						
Knowledge in physiology and/or pharmacology						
Knowledge in chemistry and/or biochemistry						
Knowledge Application	*	*	*	*	*	*
Laboratory skills						
Application of knowledge						
Originality and resourcefulness						
Professional Skills	*	*	*	*	*	*
Motivation						
Enthusiasm for science						
Perseverance						
Organizational skills						
Integrity						
Ability to work independently						
Ability to work with others						

What are the major strengths of the candidate in terms of ability or character that would be predictive of success in the Summer Pharmaceutical Sciences Research Program? *A letter, on institution letterhead, can be included.*

Signature of person
providing recommendation

Date