



UNIVERSITY OF KENTUCKY
College of Medicine

INTEGRATED BIOMEDICAL SCIENCES LETTER OF RECOMMENDATION

THIS SECTION TO BE COMPLETED BY APPLICANT

APPLICANT SECTION

Applicant's Name: _____ Email Address: _____

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 the recommendation submitted by the person to whom this form is being given.

If admitted to graduate study at the University of Kentucky, I reserve the right after enrollment to inspect the recommendation submitted by the person to whom this form is being given.

Applicant's Signature

Date

Applicant's Signature

Date

THIS SECTION TO BE COMPLETED BY RECOMMENDER

RECOMMENDER SECTION

Whenever possible please rate this applicant relative to other students who have gone to graduate school in recent years.

	POOR (0-50%)	FAIR (50-70%)	GOOD (70-80%)	EXCELLENT (80-90%)	OUTSTANDING (90-100%)	INSUFFICIENT KNOWLEDGE
Originality						
Scientific curiosity						
Scientific background						
Proficiency in lab work						
Ability to exchange ideas						
Persistence in pursuing goals						
Emotional maturity						

On a SEPARATE SHEET, PLEASE COMMENT in as much detail as possible on the strengths and weaknesses of the above named applicant. We are particularly concerned with his/her potential for independent research and teaching.

Recommender's Name: _____ Title: _____

Email Address: _____

Address: _____

Signature: _____ Date: _____

ADDRESS

Please mail completed form along with letter of recommendation to the following address. If you have any questions, please email us at IBS@lsv.uky.edu or call (859) 323-0004 or toll free (866) 239-0004.

Integrated Biomedical Sciences
College of Medicine Dean's Office
800 Rose Street, MN 150
Lexington, KY 40536-0298

