

University of Hawai'i at Mānoa Study Abroad Center

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Revised 9/20

APPLICANT'S NAME (PRINT)	
PROGRAM/LOCATION ABROAD	TERM

CONFIDENTIAL REFERENCE FORM

APPLICANT'S WAIVER STATEMENT: In accordance with the *Family Educational Rights and Privacy Act of 1974*, also known as the *Buckley Amendment*, the University recognizes that students enrolled in its Study Abroad Academic Programs have the right to inspect and review all materials in their files. The student may waive his or her right to review this confidential reference form by signing the following statement.

I understand my right under the provision of PL 93-980.513 to inspect letters of recommendation on my behalf. In order to encourage the referee to write with candor, I have elected not to exercise my rights under the aforesaid statute and affirm that I shall not do so in the future. The waiver will remain in effect until I notify the University, in writing, at which time this document will be removed from my file and returned to the referee, or until this recommendation is destroyed.

Applicant's signature

Date

1. Basis and extent of your acquaintance with the applicant:					
<input type="checkbox"/> student's current/former college instructor		<input type="checkbox"/> student's employment supervisor			
2. Academic attributes:					
	Excellent	Good	Fair	Poor	No opportunity to evaluate
Competence in major or specialization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic interest and motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for independent study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Non-academic attributes:					
	Excellent	Good	Fair	Poor	No opportunity to evaluate
Level of maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to adapt to new or unstructured circumstances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence and self-esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to relate well to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open-mindedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. If you were a resident director of an overseas academic program, would you be EAGER or RELUCTANT to have the applicant participate?					
5. On a separate sheet, frankly state your opinion of this applicant's chances for success (both academic and non-academic) in a study abroad program, weighing both strengths and weaknesses. <i>Please do not write on the back of this sheet.</i>					

REFeree'S NAME (PRINT)	TITLE	DEPARTMENT	
INSTITUTION	EMAIL	PHONE NUMBER	
SIGNATURE		DATE	

APPLICATION DEADLINES

Spring (Kōbe, Japan only)	October 1	Year (Japan only)	March 1
Spring	October 15	Year (all locations except Japan)	April 1
Summer	February 17	Fall	April 1

