Confidential Teacher Recommendation Form Instructions

You are requested to submit a recommendation for one of your students who is applying for the Basic Medical Sciences Summer Internship Program. Your candid assessment is of great value to the selection committee and to the success of the program. Please complete the form on the following page, sign it and either send it by email to comphx-bms@email.arizona.edu (please include “High School Internship” in the subject line) OR return it to the student in a sealed envelope.

Teacher recommendations are due with student applications on Friday, March 11, 2016.

Information about the Basic Medical Sciences Summer Internship Program

The goal of the Department of Basic Medical Sciences (BMS) summer internship program is to offer high school students opportunities to do hypothesis-based research and to interact with graduate students, postdoctoral associates, and faculty within the Department of Basic Medical Sciences. Students will be provided with an interdisciplinary environment that fosters critical and analytical thinking, and at the same time allows intellectual adventure. BMS Summer Internship is committed to providing hands-on research opportunities to talented students from diverse backgrounds. By exposing them to all facets of science research at the University of Arizona, the program fosters knowledge, skills, and confidence and will help students define their career goals.

Student Waiver

I, ____________________________ waive my right of access to this recommendation and I understand that I will not be able to see it under any circumstances.

___________________
Student Signature
## Teacher Recommendation Form

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<tr>
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<th>First:</th>
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<tbody>
<tr>
<td><strong>Student Name</strong></td>
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<td><strong>High School</strong></td>
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<td><strong>Teacher Name</strong></td>
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### Ratings

Please compare the applicant to other high school students in these areas:

1. **Academic Ability** (especially in science/mathematics).
   - [ ] Top 5%
   - [ ] Top 10%
   - [ ] Top 25%
   - [ ] Top 50%
   - [ ] Below Average
   - [ ] Cannot Evaluate

2. **Initiative and motivation**:
   - [ ] Top 5%
   - [ ] Top 10%
   - [ ] Top 25%
   - [ ] Top 50%
   - [ ] Below Average
   - [ ] Cannot Evaluate

3. **Conscientiousness and responsibility**:
   - [ ] Top 5%
   - [ ] Top 10%
   - [ ] Top 25%
   - [ ] Top 50%
   - [ ] Below Average
   - [ ] Cannot Evaluate

4. **Ability to work collaboratively**:
   - [ ] Top 5%
   - [ ] Top 10%
   - [ ] Top 25%
   - [ ] Top 50%
   - [ ] Below Average
   - [ ] Cannot Evaluate

5. **Ability to work in a laboratory environment**:
   - [ ] Top 5%
   - [ ] Top 10%
   - [ ] Top 25%
   - [ ] Top 50%
   - [ ] Below Average
   - [ ] Cannot Evaluate

### Remarks

Please comment on how you know the student’s strengths and weaknesses as a math or science student; and the student’s ability to thrive in an internship alongside college faculty and students.

If additional space is required, please attach a letter of recommendation.

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<th>Recommender Signature</th>
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