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 20, 2020.

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>
<th>Student Name</th>
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<tr>
<td>High School</td>
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<tr>
<td>Teacher Name</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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