

## Foreign Language and Area Studies (FLAS) Fellowship

Recommendation Form: Summer 2024 and Academic Year 2024-2025

## **DIRECTIONS FOR APPLICANTS**

Complete the Student Section of this form and provide it to professors who are able to comment on your qualifications for language and area studies. You should not request a recommendation from a non-academic reference unless you have been away from academic institutions for some time.

| STUDENT SECTION: To be completed by  | y applicant (pl   | ease type or print)   |   |
|--|---|---|---|
| Name:(LAST)  | (F  | RST)  | (MIDDLE/MAIDEN)   |
|  |   | •   | ,   |
| Department or Major(s):  |   |   |   |
| Academic Specialization:   |   |   |   |
| Proposed Language of Study:  |   |   |   |
| Courses that you have taken taught by t  | he recommend  | der:  |   |
| 1. Course #:   | Course Title:   |   |   |
| Semester Taken:  |   | Grade:  |   |
| 2. Course #:   | Course Title:   |   |   |
| Semester Taken:  |   | Grade:  |   |
| 3. Course #:   | Course Title:   |   |   |
| Semester Taken:  |   | Grade:  |   |
| APPLICANTS WAIVER OF RIGHT TO ACT The Family Educational Rights and Privacy admission, employment, or receipt of hono written in his/her behalf if the recommendar receipt of honors and if the candidate, upor recommendations on his/her behalf. The U for admission or award of fellowship. Howe as follows:  I hereby waive my right of access to this rewritten by: | Act of 1974, as rs to waive his/lition is used solon request, is no niversity does rever, under the literal | ner right of access to<br>ely for the purpose of<br>tified of the names of<br>not require that you m<br>egislation you have t | confidential letters or statements fadmission, employment, or the all persons making such nake such a waiver as a condition the option of signing such a waiver |
| Name of Recommender:   |   |   |   |
|  |   |   | on behalf of my   |
| application for award of a FLAS fellowship. the purpose of award of fellowship.  | This waiver is  | effective insofar as th   | e recommendation is used solely for   |
| Applicant name:  |   |   |   |
| (LAST)   |   | (FIRST)   | (MIDDLE/MAIDEN)   |
| Applicant Signature (digital or print):  |   |   | _ Date:   |



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TO BE COMPLETED BY RECOMMENDER (please type or print) The student named on this form has applied for a U.S. Department of Education Title VI FLAS Fellowship. Please complete this personal reference form and return it with your letter of reference via email to clas@osu.edu no later than Thursday, February 1, 2024 11:59 PM EST. Please send from your official university/ business email account (submissions from Gmail, Yahoo, or other publicly accessible accounts cannot be accepted). I have verified that the courses and grades listed on the previous page are correct: Y Ν I feel that I know the student well enough to write a recommendation: How strongly do you recommend the student for a fellowship? I strongly recommend the applicant I recommend the applicant with reservations I recommend the applicant I do not recommend the applicant Summary Evaluation: In comparison with a representative group of students in the same field who have had approximately the same amount of experience and training, how do you rate the applicant in general scholarly ability? ☐ Outstanding (highest 5%) Please indicate the educational level of the representative group ☐ Very good (next highest 10%) with whom the applicant is compared: ☐ Good (in upper 25%) ☐ Advanced graduate students ☐ Average (in upper 50%) ☐ First-year graduate students □ Below average ☐ Undergraduate juniors or seniors Some gifted individuals have mediocre scholastic records. Is the applicant's scholastic record, as you know it, an accurate index of his/her scholastic ability? Y If no, please explain briefly in your letter of recommendation. If you are writing multiple letters of recommendation, how would you rank this applicant in comparison to the others, with 1 being the highest? **Letter of Reference:** In a separate, typed letter, please address the following questions: Feasibility of Language Program and Applicant's Language Ability: What is your view of the applicant's proposed language study program? Please comment on the candidate's command of the proposed language (speaking, listening, reading, writing) and general aptitude for foreign language study. Overall Academic Merit: Give views on such matters as his/her accomplishments, intellectual independence, research interests, capacity for analytical thinking, ability to work with others, ability to organize and express ideas clearly (orally or in writing), drive, and motivation. If applicant is applying for different languages in the Academic Year competition or to the competitions in the other area studies centers, the referee should address the suitability of the proposed language study programs. Recommender name: (FIRST) (MIDDLE/MAIDEN) \_\_\_\_\_ Institution:\_\_\_\_\_ Title: Email: Address: Signature

(digital or print):

Date: