

**ACADEMIC OR PROFESSIONAL LETTER OF RECOMMENDATION**  
**CIMBA ITALY PROGRAM**

**Applicant: Please complete this section.**

Applicant's Name: \_\_\_\_\_

Applicant's School: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_

Please circle ONE option indicating the program you are applying for, and indicate the year:

Fall Semester

Spring Semester

Year \_\_\_\_\_

I waive the right to inspect this confidential recommendation. I understand that, according to the Family Educational Rights and Privacy Act of 1974, this waiver is optional.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Directions to the recommender:**

The person named above is applying for admission to the *Consortium of Universities for International Studies* full-semester abroad program. You have been selected by the applicant to submit your comments on the applicant's qualifications for this program. The information supplied on this form will be used for the purpose of assessing the applicant's qualifications for admission and, if requested and funds are available, for financial assistance. Please take a few moments to fill out the following form. Your comments will be held completely confidential if the applicant has signed the statement above. Please enclose this form in an envelope, sign your name across the envelope seal, and return it to the candidate for submission with the remainder of the application package. If you would prefer to write an original letter, you are welcome to do so. Below you will find a brief description of the program. Thank you for your cooperation and assistance.

**Program Description:**

**The Consortium's program delivers high quality, upper-division business courses taught in English. Students come from the Consortium member institutions and represent many different backgrounds. This provides a very diverse student body. The Consortium's program will be held at a complete University campus facility in Paderno Del Grappa in the Veneto region North of Venice, Italy. Classes emphasize the international learning environment and tend to focus on current international events and trends. Travel opportunities for the students are encouraged.**

1. How long have you known the applicant? \_\_\_\_\_  
Years                      months
2. Under what circumstances have you known the applicant?
3. What are the applicant's primary strengths?
4. What are the applicant's primary weaknesses or liabilities? How might these affect the applications performance in a program abroad?

5. Please comment as specifically as possible on the applicant in terms of the following: 1) academic suitability for study abroad; 2) personal suitability for living abroad; 3) any others factors which you believe may affect a successful study abroad experience.

6. Please complete the rating grid by evaluating the applicant in relation to other students you have known in a similar capacity.

	EXCEPTIONAL Upper 5%	OUTSTANDING Upper 10%	ABOVE AVG. Upper 1/3	AVERAGE Middle 1/3	BELOW AVG. Lower 1/3	NO BASIS FOR JUDGMENT
Conceptual ability						
Analytical ability						
Ability to work with others						
Initiative						
Maturity						
Effectiveness in speaking						
Effectiveness in writing						

Please describe the reference group that you are using to make your comparisons.

\_\_\_\_\_

I would (check one) \_\_\_\_\_ strongly recommend  
 \_\_\_\_\_ recommend  
 \_\_\_\_\_ recommend with reservations  
 \_\_\_\_\_ not recommend

*that the applicant be admitted to the Consortium's full-semester study abroad program in Italy*

\_\_\_\_\_  
 Name (type or print)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 College/organization

\_\_\_\_\_  
 Business Address

\_\_\_\_\_  
 City, state, zip code

\_\_\_\_\_  
 Phone

**Please return this document to:**  
**Consortium of Universities for International Studies**  
**The University of Iowa**  
**108 John Pappajohn Business Building, Suite W230**  
**Iowa City, IA 52242-1000**  
**Phone: (319) 335-0920 Fax: (319) 384-1937**  
**e-mail: cuis-info@uiowa.edu**