

# Data + Computing = Discovery

## Letter of Recommendation



### APPLICANT:

Complete the section below and submit this form to a faculty member who knows your academic qualifications. The recommender can return the completed form to you in a sealed and signed envelope for submission with the rest of your application materials or the recommender may email it directly to us by **April 1** to [iacs@stonybrook.edu](mailto:iacs@stonybrook.edu).

Applicant's Name: \_\_\_\_\_  
Last First Middle

School Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

In accordance with the Family Education Rights and Privacy Act of 1974, you may waive your right to inspect this recommendation by signing below. Otherwise, you will have access to this recommendation if you become a program participant.

Signature/Waiver: \_\_\_\_\_ Date: \_\_\_\_\_

### RECOMMENDER:

The above applicant is applying for a position in the IACS **Data + Computing = Discovery** summer research program. Selected students must show interest and great promise in pursuing a graduate degree/academic career that involves data and computational science. This program offers an outstanding opportunity for participants to work closely with faculty mentors on research projects during an 8-week residential experience. They will also benefit from skill building courses and workshops designed to enhance their competitiveness as graduate school applicants and their success in graduate study.

Please complete Sections A, B, C, and D of this recommendation form.

**A.** Recommender's Name: \_\_\_\_\_ Title: \_\_\_\_\_  
University: \_\_\_\_\_ Dept.: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Recommender's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**B.** How long have you known the applicant and in what capacity?



**Deadline: 04/01/17**  
[iacs@stonybrook.edu](mailto:iacs@stonybrook.edu)  
tel: 631-632-4629; fax: 631-632-4125



C. Please rate the applicant using the scale below.

	Excellent	Good	Fair	Poor	No Basis for Judgment
Academic performance					
Intellectual ability					
Ability to express him/herself					
Potential for conducting research					
Work ethic and responsibility					
Maturation and self-confidence					
Motivation for graduate study					

D. On a separate sheet, state your overall recommendation for this student, providing an assessment of his/her character, qualifications, and potential for success in research and graduate study. Please include in your statement details about his/her strengths and weaknesses based on your knowledge of his/her work and abilities.

*This form and your letter may be returned to the applicant in a signed and sealed envelope or returned directly to the Institute for Advanced Computational Science at the following email address by **April 1, 2017**:*

[iacs@stonybrook.edu](mailto:iacs@stonybrook.edu)

*Contact us with questions or concerns at:*

631-632-4629 office

631-632-4125 fax

[iacs@stonybrook.edu](mailto:iacs@stonybrook.edu)