

JMU Learning Centers

Science and Math Learning Center

738 S. Mason Street., MSC 1023

Harrisonburg, VA 22807

(540) 568 – 3379 (phone)

(540) 568 – 2926 (fax)

**LETTER OF RECOMMENDATION**

**TO BE COMPLETED BY THE APPLICANT:**

**Applicant Name:** Click or tap here to enter text. **Major:** Click or tap here to enter text.

**Discipline you wish to tutor: (check all that apply)**

General Chemistry  Organic Chemistry  Physics Math Statistics

**You are required to submit two letter of recommendation forms.** One letter must be from the professor/instructor in the discipline in which you wish to tutor and we recommend the second form be from someone who can speak to your character and academic abilities.

The recommendation form should be sent or e-mailed to the respective discipline contact (see below for appropriate contact).

Under the Federal Family Educational Rights and Privacy Act of 1974, students are entitled to review their records, including letters of recommendation. However, those writing and assessing recommendations may attach more significance to them if it is known that the recommendation will remain confidential. It is your option to waive your right to access these recommendations or to decline to do so. Please mark the appropriate phrase below, indicating your choice of option and sign your name:

I waive my rights to future access to this recommendation  I do not waive my rights to future access to this recommendation

Signature of Applicant (or type your name) : Click or tap here to enter text. Date: Click or tap here to enter text.

**TO BE COMPLETED BY THE RECOMMENDATION WRITER**:

The person whose name appears above has applied to be a peer tutor in the Science and Math Learning Center. We would appreciate your candid appraisal. If you wish to use a letter or different format, please feel free to do so.

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

|  |
| --- |
| Click or tap here to enter text. |

**Please assess the applicant relative to other students or employees whom you have known in a similar capacity.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Characteristics** | **Outstanding**  **(Top 2%)** | **Superior**  **(Top 10%)** | **Good**  **(Top Third)** | **Fair**  **(Middle Third)** | **Poor**  **(Bottom Third)** | **Unable to Judge** |
| Academic ability in specific discipline |  |  |  |  |  |  |
| Work Ethic |  |  |  |  |  |  |
| Interpersonal skills |  |  |  |  |  |  |
| Ability to work with others |  |  |  |  |  |  |
| Independence/Initiative |  |  |  |  |  |  |
| Communication skills |  |  |  |  |  |  |
| Maturity |  |  |  |  |  |  |
| Concern for Others |  |  |  |  |  |  |
| Problem solving skills |  |  |  |  |  |  |
| Adaptability |  |  |  |  |  |  |
| Professional Commitment |  |  |  |  |  |  |
| Leadership potential |  |  |  |  |  |  |

**Any additional comments? Please provide any remarks you feel are important below. (If more space is needed, please attach to this form.)**

|  |
| --- |
| Click or tap here to enter text. |

**What is your overall recommendation?**

Strongly Recommend

Recommend

Recommend with Reservation

Would not recommend

|  |
| --- |
| Recommender’s Name: Click or tap here to enter text. |
| Position/Title: Click or tap here to enter text. |
| Institution/Employer: Click or tap here to enter text. |
| Phone Number: Click or tap here to enter text. |
| Email address: Click or tap here to enter text. |

***Please return completed form to Science and Math Learning Center or e-mail to the respective discipline contact (see below). Thanks for your assistance.***

**Chemistry**: Dr. Mary Tam (tammc@jmu.edu)

**Mathematics:** Jenna Guenther (guenthjc@jmu.edu)

**Statistics:** Dr. Beth Cochran (cochrabs@jmu.edu)

**Physics**: Jason Sterlace ([sterlajc@jmu.edu](mailto:sterlajc@jmu.edu))

**If returning by mail, send to:**

*Discipline Contact*

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