



FACULTY RECOMMENDATION FORM FOR MURF PARTICIPATION

TO THE MURF APPLICANT: For MURF eligibility, you must submit this form to a faculty sponsor who is familiar with your academic work and who will work with you in organizing your poster for the MURF conference. You must identify a faculty sponsor and have him/her submit this form with your application by the deadline.

Applicant Information

Form with fields for Applicant's name, Date, Project title, Faculty sponsor, and Faculty department.

TO THE MURF FACULTY SPONSOR: Letters of recommendation are a vital part of the application process. Please provide the following information concerning the applicant's academic and personal suitability for the MURF conference. This form is due by the date noted above.

1. How well do you know applicant? (Check the most appropriate response.)

- Extensive contact as advisor, Limited contact in classroom environment, Well acquainted in classroom environment, Other

2. Please indicate the applicant's academic attributes.

Table with 7 columns (Excellent, Good, Fair, Poor, No opportunity to observe, NA) and 3 rows (Competence in Major/specialization, Academic interest and motivation, Ability to express thoughts).

3. As the MURF conference only allows ten projects per campus, it is important for us to identify students who can carry out the responsibilities associated with participation. Please evaluate the applicant's suitability for the MURF conference.

	Excellent	Good	Fair	Poor	No opportunity to observe
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-reliance/independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to communicate with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. While our students have an incredible opportunity to present their research at the State Capitol, they are also serving as representatives of UM-Flint. Please indicate how much you agree or disagree with the following statements about the student:

I believe this student can:

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Effectively communicate with state legislators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Make appointments to meet with legislators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follow up on appointments made with legislators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectively network with other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Present his/her research clearly and concisely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meet MURF deadlines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Based on the information you have provided:

- I recommend this student's participation in MURF and I will serve as his/her advisor.
- I do not recommend this student's participation in MURF and will not serve as his/her advisor.

Faculty Signature: _____ Date _____

Printed Name: _____

Please return this form to:
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