## Recommendation Form

## Deadline: 11:59 PM EST on January 30, 2024

The recommender should email the completed form from their own email address to pauley.undergradfellowship@ycuhealth.org. Please note that this form has two pages.

Before emailing the completed form, please change the file name of this document to include the applicant's LAST NAME and FIRST NAME followed by "2024PauleyAHAUndergradFellowshipRecForm." Example: SmithJohn2024PauleyAHAUndergradFellowshipRecForm.pdf

Student Applicant

| First Name: | Last Name: |
| :--- | :--- |

## Part 1.

Recommender

| First Name: | Last Name: |
| :--- | :--- |
| Email Address: | Phone: |
| Affiliation: |  |
| How long have you known the applicant? |  |
| In what capacity? |  |

Compared to his/her peers, please rate the applicant on the qualities listed below (check only one box):

|  | Below <br> average | Average |  | Above <br> Average | Exceptional | Unable to <br> assess |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: |
| scientific curiosity | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| motivation | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| intellectual ability | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| analytical ability | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| verbal communication | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| written communication | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| work ethic | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| maturity | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| reliability | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| ability to work <br> independently | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| potential for a career in <br> research | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |
| overall | $\square$ | $\square$ | $\square$ | $\square$ |  |  |

Pauley Heart Center 2024 AHA Undergraduate Research Fellowship

## Pauley Heart Center

Student Applicant
First Name: $\quad$ Last Name:

## Part 2.

Choose several qualities in the above chart and elaborate on them. Please discuss the applicant's strengths and weaknesses, ideally with regard to their academic and/or research experience.

