



**THE CATHOLIC UNIVERSITY OF AMERICA**  
*Institute for Policy Research & Catholic Studies*

***International Program Associates Reference Form Part I***

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

Name of Reference (*please print*) \_\_\_\_\_

**To the applicant** – *Please check one of the following statements:*

- I waive my right of access to this reference form.
- I do not waive my right of access to this reference form.

Signature of Applicant \_\_\_\_\_

**To the reference** – *Please return the recommendation in a sealed envelope to the applicant. Thank you for your comments. All applications are due by **February 28, 2017**.*

1. How long have you known the applicant? In what capacity?
2. Please describe your experience of the applicant's ability to work and relate to others.
3. Please describe how you think the applicant will succeed in an international setting.

***Please complete survey on the next page.***



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<b>Reference Part II</b> <i>(Professional)</i>	<i>Excellent</i>	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>	<i>Weak</i>	<i>Unable to judge</i>	<b><u>Comments</u></b>
<i>Check the box that you feel best describes the applicant.</i>							
Maturity							
Ability to think critically							
Ability to handle stress							
Quality of relationships							
Sensitivity to others							
Dependability							
Ability to work independently							
Ability to accept criticism							
Oral communication skills							
Written communication skills							
Intellectual ability							
Empathic capacity							
Understanding of self							
Integrity							

List three adjectives that best describe the applicant:

\_\_\_\_\_

Overall, how would you rate the applicant?

- Recommend most highly     
  Recommend strongly     
  Recommend  
 Recommend with reservation     
  Do not recommend

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_

Title \_\_\_\_\_