

Academic Recommendation

(Advisor or Teacher)

| Applicant's Name | Phone |
|--|---|
| Address | |
| I waive my right to view this recommembers to contact this reference. | nendation and allow the Alliance's Scholarship committee |
| Signature | |
| INSTRUCTIONS TO REMEMBER: Please respond to the following questions on the back of this page or use a separate sheet. Place your recommendation in an envelope and write the applicant's name on the front. Seal the envelope and sign your name across the flap to insure confidentiality. Return the sealed envelope to the applicant who will forward it as part of his/her application. POSTMARK DEADLINE FOR THE COMPLETE APPLICATION IS FEB 15 th 2016. | |
| are his/her prospects for future a 4. In your opinion, will the applicant successfully? 5. Would the applicant make a good abroad? 6. How important is assistance from accomplish the project? | plicant? licant's academic performance to date and what do you feel achievement? It take his/her proposal seriously and carry it through I ambassador and reflect well on the U.S. while studying In the Alliance Française to the applicant's financial capacity to bout the applicant's character, reliability, ambition, |
| Your Name | Title |
| Address | |
| | |
| School | Phone |
| Signature | Date |