## WELLESLEY-IN-AIX FACULTY RECOMMENDATION

Due: March 15 for Fall Semester, October 1 for Spring Semester

Name of applicant:							· · · · · · · · · · · · · · · · · · ·
Proposed term of study: [ ] Fall 2021 [ ] Academic Year 2					)21-22 [ ] Spring 2022		
To the applicant: Please ask complete this form. Select son recommendation. Note: Feder them. Applicants may choose will have more weight, sign be to review this recommendation	neone who kr ral law provid to waive this low before gi	nows es fo statu ving	you rear r access tory righ	sonably by stud nt. If you	well ents think	and can prov to recommer a confidentia	ide a thoughtful Idations written for al recommendatior
I waive my right of access to the	his recomme	ndatio	on: (app	licant sig	ınatı	ıre)	
To the recommender: The in accepted, the student will enro appreciate your evaluation of adjusting successfully to life a please rate the student in the	oll in courses the student's nd study in F	at Aiz intelle rance	x Marse ectual a	ille Unive bility, aca	ersity aden	and/or Scier nic motivation	nce Po Aix. We , and potential for
	Top 5%	Top 10%		Top 25%		Top 50%	Unable to judge
Analytical Skills	-			-		-	
Writing Skills							
Oral Communication							
Intellectual Curiosity							
Work Ethic & Habits							
A student's capacity to adjust below. Please rate the following	•	to life	and stu	ıdy in Fra	ance	also depend	s on the factors
	Above avera	age	Average		Below average		Unable to judge
Ability to work independently							
Works well with others							
Maturity							
Flexibility & Ability to Adapt							
Motivation for study abroad							
In what capacity and how long	ı have you kn	own	the app	icant?			
Signature:					Date:		
Print name:					Tel:		
Title:					Email:		
Institution:							

Please submit completed forms via e-mail to wia@wellesley.edu.