Academic Reference Form UVic International Centre for Student Exchange Program

Please print clearly if written

<u>Student Applicant</u>: Please complete the boxes below before giving this form to an academic instructor.

Student Name:	Student No:				
Course(s) taken from this instructor:					
Deadline for Academic Instructor to submit this form:					

Note: Please indicate N/A for any fields you are unable to speak to.

Information Concerning Applicant

How do you know the student?										
Please rate the applicant in the following areas from 1 to 10:	< Low < > High >									
	1	2	3	4	5	6	7	8	9	10
Ability to meet deadlines										
Written skills										
Oral skills/level of participation										
Respect for different opinions/ideas										
Motivation/energy level										
Exam/presentation preparation										
Standing in class (10 = 100%ile)										

Academic Reference Form (Continued)

Please comment on this student's readiness to participate in an International Exchange experience.				
I recommend this student for participation in the International Exchange Program.				
□ Yes	🗌 No			
Instructor Name:	Instructor Signature:			
Position or Title:	Date of Signature:			
Office Phone Number:	E-mail Address:			
Department:	Institution if not UVic:			

Please either return the completed form to the student, or email the completed form directly to the ICS office: goglobal@uvic.ca.

Note: If you cannot add an electronic signature, your email submission to our office will be sufficient instead.

Deadline: Feb 1st, for First Term or Full Academic Year Exchange Aug 1st for Second Term Exchange

If you have any questions about this form, please email goglobal@uvic.ca.

For more information about this program, please see <u>www.uvic.ca/exchange</u>.