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THE BUCKLEY AMENDMENT

DEPARTMENT OF BIOLOGY, Graduate Admissions
----------------------------------------------------------------
REFERENCE
REPORT
THE UNIVERSITY OF IOWA, IOWA CITY, IOWA  52242
ON APPLICANT

Name of recommender _____________________________________ Name of applicant _____________________________________
(Typed or printed) (Typed or printed)
Title ___________________________________________________ Applicant's field ________________________________________
(e.g. Zoology, Botany, Genetics)
Institution _______________________________________________

1. I have known the applicant for a period of __________ years and/or months as:

   ___ an undergraduate   ___ graduate   ___ research assistant   ___ teaching assistant   ___ other

2. I served as: ___ research adviser   ___ teacher in several classes   ___ department chairman   ___ other

   ___ major advisor   ___ teacher in only one class   ___ other (specify): _____________________________

NOTE: We might classify a typical group of 100 students at the applicant's level like this:

<table>
<thead>
<tr>
<th>Below Average</th>
<th>Average</th>
<th>Somewhat Above Average</th>
<th>Good</th>
<th>Unusual</th>
<th>Outstanding</th>
<th>Truly Exceptional</th>
<th>Inadequate Opportunity to observe</th>
</tr>
</thead>
</table>

3. Degree of mastery of the fundamental knowledge in his or her general field:

4. Knowledge of, and ability to use the basic research techniques in this field:

5. Possession of a fertile imagination and originality in this field:

6. Self-reliance and independence in scientific work:

7. Motivation toward a successful productive scientific career

8. Emotional stability and maturity:

9. Effectiveness and originality in presenting subject matter:

10. Enthusiasm and ability to stimulate student interest:

11. Competence in subject matter taught:

12. Classroom presence:

13. Interest in teaching:
14. In the space below, please add any descriptive comments which will assist in proving a complete picture of the applicant's abilities and commitment to an appropriate career:

______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________
______________________________________________________________________________________________________________

The educational level of the representative group with whom the applicant is compared is:

_____ College seniors       _____ First Year Graduate Students  _____ Intermediate Year Graduate Students

15. In comparison with a representative group of students in the same field who have had approximately the same amount of experience and training, how do you rate the applicant in GENERAL ALL AROUND SCIENTIFIC ABILITY?

<table>
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<tr>
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</tr>
</thead>
</table>

16. Among the _______ students at this educational level whom I have known in the past ________ years, I would rank this applicant about ______ from the top in over-all scientific ability.

17. Gifted individuals often make indifferent scholastic records. If your rating does not agree with the applicant's scholastic record, please explain:

_________________________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Address of recommender ______________________________________

Signature of recommender ______________________________________

Date _____________________________________________

I (waive/do not waive) the right to inspect this letter if I should matriculate at the University of Iowa.

Signature of applicant ______________________________________

Date _______________________

E-mail: ___________________________________________

Phone: ___________________________________________