

Upward Bound Math and Science Student Reference Form

Students, please have a teacher, counselor, or administrator complete this form.

Teacher/Counselor/Administrator Name (please print): _____

Title: _____

Student's Name (please print): _____

I have known the above student _____ years / months.

Please check all that apply:

- I know the above student through personal interaction outside of the classroom or office.
- I know the above student through classroom and/or office interaction.
- I have a general acquaintance of the student, but do not know him/her well.

Do you consider the above student to be in academic risk? Yes No Maybe

Does the above student have the potential to achieve a postsecondary education? Yes No Maybe

Please compare the students to other students in your classroom/office.

	<i>Superior</i>	<i>Good</i>	<i>Average</i>	<i>Below Average</i>
Personality				
Alertness				
Leadership				
Verbal Ability				
Responsibility				
Enthusiasm				
Academic Achievements				
Non-Academic Achievements				
Acceptance of Criticism				
Motivation				
Self-esteem				

Comments: _____

Teacher/Counselor Signature: _____ Date: _____

Please return to:
University of Northern Iowa
Upward Bound Math and Science Program
 800 Sycamore Street
 Waterloo, Iowa 50703-4730
 (319) 273-4772 • (319) 433-0160