



## Foreign Language and Area Studies (FLAS) Fellowship

### Recommendation Form: Summer 2024 and Academic Year 2024-2025

#### DIRECTIONS FOR APPLICANTS

Complete the Student Section of this form and provide it to professors who are able to comment on your qualifications for language and area studies. You should not request a recommendation from a non-academic reference unless you have been away from academic institutions for some time.

#### STUDENT SECTION: To be completed by applicant (please type or print)

Name: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE/MAIDEN)

Department or Major(s): \_\_\_\_\_

Academic Specialization: \_\_\_\_\_

Proposed Language of Study: \_\_\_\_\_

#### Courses that you have taken taught by the recommender:

1. Course #: \_\_\_\_\_ Course Title: \_\_\_\_\_

Semester Taken: \_\_\_\_\_ Grade: \_\_\_\_\_

2. Course #: \_\_\_\_\_ Course Title: \_\_\_\_\_

Semester Taken: \_\_\_\_\_ Grade: \_\_\_\_\_

3. Course #: \_\_\_\_\_ Course Title: \_\_\_\_\_

Semester Taken: \_\_\_\_\_ Grade: \_\_\_\_\_

#### APPLICANTS WAIVER OF RIGHT TO ACCESS

The Family Educational Rights and Privacy Act of 1974, as amended, (P.L.93-380), allows a candidate for admission, employment, or receipt of honors to waive his/her right of access to confidential letters or statements written in his/her behalf if the recommendation is used solely for the purpose of admission, employment, or the receipt of honors and if the candidate, upon request, is notified of the names of all persons making such recommendations on his/her behalf. The University does not require that you make such a waiver as a condition for admission or award of fellowship. However, under the legislation you have the option of signing such a waiver as follows:

I hereby waive my right of access to this recommendation and any appropriate attachments which have been written by:

#### Name of Recommender:

\_\_\_\_\_ on behalf of my application for award of a FLAS fellowship. This waiver is effective insofar as the recommendation is used solely for the purpose of award of fellowship.

Applicant name: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE/MAIDEN)

Applicant  
Signature  
(digital or  
print): \_\_\_\_\_

Date: \_\_\_\_\_



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### Recommendation Form: Summer 2024 and Academic Year 2024-2025

**TO BE COMPLETED BY RECOMMENDER (please type or print)**

The student named on this form has applied for a U.S. Department of Education Title VI FLAS Fellowship. **Please complete this personal reference form and return it with your letter of reference via email to [easc@osu.edu](mailto:easc@osu.edu), NO LATER THAN WED., FEBRUARY 1, 2024.** Please send from your official university/business email account (submissions from Gmail, Yahoo, or other publicly accessible accounts cannot be accepted).

**I have verified that the courses and grades listed on the previous page are correct:**    Y    N

**I feel that I know the student well enough to write a recommendation:**    Y    N

**How strongly do you recommend the student for a fellowship?**

I strongly recommend the applicant

I recommend the applicant with reservations

I recommend the applicant

I do not recommend the applicant

**Summary Evaluation:** 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 scholarly ability?

Outstanding (highest 5%)

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

Very good (next highest 10%)

Advanced graduate students

Good (in upper 25%)

First-year graduate students

Average (in upper 50%)

Undergraduate juniors or seniors

Below average

**Some gifted individuals have mediocre scholastic records. Is the applicant's scholastic record, as you know it, an accurate index of his/her scholastic ability?**    Y    N

If no, please explain briefly.

**Letter of Reference:** In a separate, typed letter, please address the following questions:

Feasibility of Language Program and Applicant's Language Ability: What is your view of the applicant's proposed language study program? Please comment on the candidate's command of the proposed language (speaking, listening, reading, writing) and general aptitude for foreign language study.

Overall Academic Merit: Give views on such matters as his/her accomplishments, intellectual independence, research interests, capacity for analytical thinking, ability to work with others, ability to organize and express ideas clearly (orally or in writing), drive, and motivation.

If applicant is applying for different languages in the Academic Year and Summer competitions or to the competitions in the other area studies centers, the referee should address the suitability of the proposed language study programs.

**Recommender name:** \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE/MAIDEN)

**Title:** \_\_\_\_\_ **Institution:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Signature (digital or print):** \_\_\_\_\_ **Date:** \_\_\_\_\_