



Alcorn State University

Be Brave Teach STEM Recommendation Form

Applications received by March 1, are considered for the fall; Applications received by October 1, are considered for the spring.

Instructions to the applicants:

**ROBERT NOYCE
SCHOLARSHIP APPLICATION
Confidential Recommendation Form**

Recommendation forms and letters must be received by: _____

Part 1:

Student's Name: _____ Evaluator's Name: _____

The Family Education Rights and Privacy Act of 1974 and its amendment's guarantee your rights to access your educational records. You are also permitted by those laws to voluntarily waive that right of access. Please indicate below your decision related to access to this letter of recommendation.

- I waive my right of access to this letter of recommendation.
- I do not waive my right of access to this letter of recommendation.

Signature: _____ Date: _____

Instructions to recommender:

In an effort to increase the number and quality of science and mathematics teachers in high need school districts, the National Science Foundation created the Robert Noyce Scholars Program. Alcorn State University is host to a Robert Noyce grant, the Be BRAVE Teach STEM Scholarship Program. We are able to award large scholarships to qualified STEM education majors who plan on earning a teaching credential in mathematics or science. In return for the funding, scholars agree to teach two years in a high needs school district for each year of support. The person named above is applying for admission to this program, and has identified you as a recommender. Please provide your impressions and assessments regarding the applicant's intellectual ability, disposition and character, potential for productivity and scholarship, creativity, leadership abilities, professional preparedness, and other aptitudes and skills that may be considered by the Scholarship application committee.



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Part 2: Applicant Evaluation (Please type or print)

How do you rate the applicant on each of the following characteristics? Please place an "X" in the rating box which best describes the applicant.

Characteristic	Excellent	Good	Fair	Poor	No basis for Judgement
Intellectual ability (keenness, originality, capacity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism (promptness, perseverance, dependability)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative (Imagination, independence, resourcefulness)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic competency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity (assertiveness, leadership)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personality (self-confidence, sense of humor)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expression (oral)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expression (written)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude towards difficult challenges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use a separate sheet, preferably a school, organization, or company letterhead, to write a letter of recommendation and attach it to this form. Please be frank and provide as much information as possible, including challenges, achievements, and experience working with children or youth and community organizations, and other special considerations pertaining to the applicant. Include in your assessment how long and in what capacity you have known this student.



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Part 3:

Based on your knowledge of this applicant, please describe their potential for success as a science or mathematics teacher.

Please provide your overall recommendation of the applicant with respect to their admission to the Alcorn state University /Be BRAVE Teach STEM Program (please check one):

<input type="checkbox"/> I highly recommend this applicant	<input type="checkbox"/> I recommend this applicant but with some reservations
<input type="checkbox"/> I recommend this applicant	<input type="checkbox"/> I am not able to recommend this applicant

Please e-mail (preferred) or mail your letter directly to:

Dr. LaShundia Carson
ldcarson@alcorn.edu
1000 ASU Dr. #989
Lorman, MS 39096

Thank you very much.