

## INSTRUCTOR RECOMMENDATION FORM for the Maxwell Program in Citizenship & Civic Engagement

**TO THE STUDENT:** Complete the top portion of this form, and email it to the instructor that has agreed to support your application to the CCE program. Remember to provide your recommender ample time to complete and submit this form.

Name: \_\_\_\_\_ SU ID#: \_\_\_\_\_  
First Middle Initial Last

Intended Major(s): \_\_\_\_\_

Under the Family Education Rights and Privacy Act (FERPA)

I have retained my right to access this recommendation.

I have waived my right to access this recommendation.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TO THE RECOMMENDER:** *Please use Adobe Acrobat to complete the following questions.*

The student named above is applying for admission to the Maxwell Program in Citizenship and Civic Engagement. This program is suited to students who demonstrate academic excellence as well as a desire for active, practical engagement in the world around them. Your assessment of the student’s ability to be successful in a rigorous and self-directed curriculum is an important part of our selection process; your honest and frank feedback is appreciated.

How long and in what capacity have you known the student?

Please rate the applicant on the following characteristics by placing an X in the corresponding box:

	Not Applicable	Poor	Average	Fair	Good	Excellent
Overall Academic Performance						
Writing Ability						
Class Participation						
Work Ethic						
Motivation						

Please assess the quality and level of the student's academic work. List the strengths and weaknesses, as appropriate.

How would you judge this student's leadership qualities and ability to work well with others?

How would you judge this student's ability to begin self-directed work in the local or national public arena (with nonprofits, local government organizations, private companies, etc.)?

Is there anything else you would like the selection committee to know as it considers this student's application?

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Please check the box that best reflects your recommendation of this applicant.

Strongly Recommend

Recommend

Recommend with Reservations

Do not Recommend

Name of Recommender: \_\_\_\_\_ Position: \_\_\_\_\_

Address at Syracuse University: \_\_\_\_\_

Email: \_\_\_\_\_@syr.edu Telephone: \_\_\_\_\_

May we contact you if we have questions about your recommendation? \_\_\_\_\_

**We prefer to receive your recommendation via email at [cceapplications@maxwell.syr.edu](mailto:cceapplications@maxwell.syr.edu). Recommendations can also be mailed through campus mail to the CCE Program, Maxwell Hall 404.**