



# UNIVERSITY OF GEORGIA

College of Agricultural & Environmental Sciences

## Reference Form International Agriculture Certificate Program

**Return to:** CAES International Programs; 221 Hoke Smith Building; Athens, GA 30602. [ogp@uga.edu](mailto:ogp@uga.edu)

*This section is to be completed by the student applicant (please print)*

|   |  |                           |  |
|---|--|---------------------------|--|
| <b>Applicant Name</b>   |  |                           |  |
| <b>Email</b>  |  | <b>Local Phone Number</b> |  |
| <b>This reference is:</b> <input type="checkbox"/> Confidential <input type="checkbox"/> Not Confidential |  |                           |  |

*This section is to be completed by the referee*

|                        |  |                         |  |
|------------------------|--|-------------------------|--|
| <b>Name of Referee</b> |  | <b>Title of Referee</b> |  |
| <b>Email</b>           |  | <b>Phone Number</b>     |  |

**1. How long have you known the applicant and in what capacity?**

**2. Is there any reason why you would not recommend that the applicant participate in a study abroad or the International Agriculture Certificate Program?**

*Please indicate your perceptions of the applicant's competence in the following areas:*

| Area                            | Below Average            | Average                  | Above Average            | Outstanding              | Inadequate Opportunity to Observe |
|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------------------|
| Intellectual Curiosity          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>          |
| Emotional Maturity              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>          |
| Stress Tolerance                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>          |
| Ability to interact with others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>          |
| Adaptability                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>          |
| Cooperation                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>          |
| Self-motivation/ Initiative     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>          |

**Other remarks may be written or typed on this form or on a separate sheet:**

|                             |  |             |  |
|-----------------------------|--|-------------|--|
| <b>Signature of Referee</b> |  | <b>Date</b> |  |
|-----------------------------|--|-------------|--|

**\* Please notify the student when he/she may pick up reference or forward it to the address above**