

## Faculty Letter of Reference Form

### Note to Referee:

1. The student named on this form is applying for a University Wide exchange. The student has given York University consent to contact you to act as a reference.
2. To assist the selection committee in making its decision with regard to the student's participation in the program, we would appreciate your evaluation of the student in a few areas that are important to their success as an exchange student.
3. Once completed, please return to **York International by mail or in person (200 York Lanes, 4700 Keele Street, Toronto, Ontario, M3J1P3), by fax - 416-736-5176, or as an e-mail attachment ([goglobal@yorku.ca](mailto:goglobal@yorku.ca)).** Alternatively, **place reference in a sealed and signed envelope and return it to the student so that s/he can submit it with their application.**
4. Our student exchange programs provide an opportunity for undergraduate and graduate students to experience the academic and social life of another country while fulfilling their degree requirements at York University

Student Name: \_\_\_\_\_ Exchange Destination: \_\_\_\_\_  
(1<sup>st</sup> choice university, country)

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

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Please indicate your assessment of the student's competence in the following areas in comparison with other students whom you have known at similar stages in their studies.

	Below Average	Average	Above Average	Very Good	Outstanding	Unable to Comment
Self-Motivated						
Articulate						
Perceptive						
Adaptable						
Responsible						
Self-reliant						
Intellectually Curious						
Active Participant in Class Discussion						
Interpersonal Skills						

Comments (please feel free to attach additional comments):

Faculty/Department \_\_\_\_\_ Telephone Number ( ) \_\_\_\_\_

Name of Referee: \_\_\_\_\_ E-mail Address \_\_\_\_\_

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