KALAMAZOO COLLEGE

HHMI Undergraduate Research Program
Student Research Project Grants

Letter of Recommendation from a Kalamazoo College Faculty Member

Name of Applicant: ________________________________

I [ ] do/ [ ] do not waive my right of access to this letter. (check one)

Applicant’s Signature

To the recommender: Please provide information that you have regarding the qualifications of this candidate for a Student Research Project Grant. Identify the capacity in which you have known this student, e.g. as a student in one class, more than one class, advisee, etc. Insofar as possible, please make an effort to identify especially strong aptitudes and talents in the sciences, and estimate of the potential to develop a successful research project, and some basis of comparison of the abilities as compared to other students you have known. Please submit your letter by Wednesday, April 16, 2008 to:

Dr. Jeffrey Bartz
Associate Professor of Chemistry
Kalamazoo College
1200 Academy Street
Kalamazoo, MI 49006

jbartz@kzoo.edu

[ ] Signature [ ] Date

[ ] Printed Name [ ] Title

Thank you for your support of our HHMI Student Research Program.