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| --- |
| Applicant Name:  |
| Waiver: I waive my right of access to this confidential letter of recommendation received in connection with my application to the BUILD PODER program at CSUN or Community College. I understand that I am not required to waive my rights to access these materials as a condition of receipt of any service or benefit provided by the campus and that this waiver does not preclude my requesting the names of those individuals who provide confidential statements or evaluations. |
| ❑ I waive my right❑ I do not waive my right |

Dear Recommender,

You have been listed as a recommender for a student applying for the Building Infrastructure Leading to Diversity (BUILD) Promoting Opportunities for Diversity in Education and Research (PODER) at CSU Northridge or one of it’s partnering community colleges for the 2016-17 academic year.

BUILD PODER is a new program funded by the National Institutes of Health focusing on training undergraduate students in health-related research in preparation for graduate studies. You can complete the attached form or click on the following link to submit your recommendation online by **Friday, February 5, 2016**.

[**http://tinyurl.com/buildpoderlor**](http://tinyurl.com/buildpoderlor)

We appreciate you taking time to recommend a student for BUILD PODER. If you have any questions, please feel free to email us at build@csun.edu.

Sincerely,


Gabriela Chavira, Ph.D.

Student Training Core Director, NIH BUILD PODER

**Recommender Form for**

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**A. APPLICANT:** Please complete this section before giving the form to a recommender. Print legibly or type.

Which campus are you applying to? \_\_\_ CSUN \_\_\_ELAC \_\_\_ LAMC \_\_\_ LAPC

 \_\_\_ LAMC \_\_\_ PCC \_\_\_ SMC

I do \_\_\_\_ do not \_\_\_ waive my right of access to this confidential letter of recommendation received in connection with my application to the BUILD PODER program. I understand that I am not required to waive my rights to access these materials as a condition of receipt of any service or benefit provided by the campus and that this waiver does not preclude my requesting the names of those individuals who provide confidential statements or evaluations.

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

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. RECOMMENDER:** Please compete the following information and mail it to:

BUILD PODER Admissions ⚫ Department of Psychology ⚫ CSU Northridge ⚫ 18111 Nordhoff Street ⚫ Northridge, CA 91330-8255

by Friday, February 5, 2016. A supplemental narrative letter may be attached to this form. Please note that your recommendation will not be reviewed by the applicant when waived by the above applicant.

Recommender’s Name (Printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Recommender’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Recommender’s Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Recommender's E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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In comparison to other students whom you have known, how would you rate this applicant in terms of?

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|  | Superior (95-100%) | Excellent (90-94%) | Very Good (80-89%) | Good (70-79%) | Fair (50-69%) | Poor (0-49%) | Unable to Judge |
| Demonstrated research ability |  |  |  |  |  |  |  |
| Ability to work with others |  |  |  |  |  |  |  |
| Ability to work independently |  |  |  |  |  |  |  |
| Writing skills |  |  |  |  |  |  |  |
| Speaking skills |  |  |  |  |  |  |  |
| Conceptual ability |  |  |  |  |  |  |  |
| Receptivity to criticism |  |  |  |  |  |  |  |
| Appreciation of diversity |  |  |  |  |  |  |  |
| Perseverance toward goals |  |  |  |  |  |  |  |

Please comment below or in an accompanying letter on any of these categories or other areas that you think would be helpful in assessing the applicant’s qualifications for the program.