## LETTER OF RECOMMENDATION FOR PARTICIPATION

A faculty member familiar with the applicant's academic background, interests, and abilities should complete this form. Information about the REU program can be found at http://www.cs.uh.edu/reu. The letter must be received by March 15th, 2021.

## **Student Information**

Student Name	
Academic Major	
Name of College/University	
Evaluation of Student	

## E

How long	g have you known t	he applicant? And in	what capacity?		
What is y	your rating of the a	pplicant relative to h	is/her peers?		
,	☐ Top 10%	☐ Top 20%	☐ Top 30%	☐ Top 50%	Other
		<u> </u>			_
					g skills and goals. Use dation may be attached.

Additional Comments (optional):	
Additional Comments (optional).	
Faculty Information	
Faculty Name	
Department	
Institution	
Office Phone	
E-mail Address	
Signature (Hard Copy Only)	
Date	