



Recommendation Form

This form is mandatory for all students applying to an EESA program with current GPA below 2.8 on a 4.0 scale

Student Information:

Last *Middle* *First* *Contact Phone Number*

Academic institution you are currently attending *Academic year at program start*

Term you plan to study abroad *Year* *Email*

Advisor/Professor Information:

To be filled out by student's professor or advisor. The Recommendation and the Advisor Approval form must be filled out by different professors.

Last Name *First Name* *How long have you known the student?*

Title *Department* *College or University*

Email *Telephone* *Fax Number*

List of your courses the student has taken: _____

On a separate sheet of paper, please write your comments on student's academic ability and your view on his or her ability to study at a university abroad for a semester. You may add any additional information about this student pertinent to his or her application.

Advisor or Professor Signature *Date*

After completing this form, please place the recommendation in an envelope, seal it and sign over the seal. Return it to the student or mail it to Eastern European Study Abroad to the following address:

*Eastern European Study Abroad
P.O. Box 204
Edwards, CO 81632*