PICNICS Student Application Form for Summer										
Applicant's Name:										
Your name:										
									_	
	School: CONFIDENTIAL REFERENCE:									
You have been selected as a reference for the above-named student, who is applying for acceptance to the PICNICS program. The PICNICS program is an intensive experience designed to expose students to a cutting-edge research atmosphere hosted by the center of pure and applied photosciences and the department of chemistry at Bowling Green State University. So please bear in mind that the program requires students to be highly self-motivated. As competition for the summer internships/fellowships is likely to be keen, your insights will play a crucial role in the selection process.										
Name of class Grade Rank and # in class										
Use the following scale to standardize your rating:										
1	2	3	4	5	6	7	8	9	10	
Bot	tom 50%	Тор	50%	Тор	25%	Top 10%		Top 5%		
How many months have you been in frequent contact with the applicant?  1. This student has demonstrated the ability to use logical and abstract thinking processes.										
	1	2 3	4	5	6	7 8	9	10		
Please provide supporting comments:  2. This student has demonstrated a natural talent for math and science.										
	1	2 3	4	5	6	7 8	9	10		
	•	_ 0	•	Ü	Ü	. 0	Ü	. •		
Please provide supporting comments:										
3. This student has demonstrated the ability to apply concepts to new situations.  1 2 3 4 5 6 7 8 9 10  Please provide supporting comments:										

Name of the Student:									
4. This student i 1 Please provide	2	3	4	5	ework a 6	and ask 7	king for 8	help w 9	hen necessary 10
5. This student I to accomplish 1 Please provide	his/her 2	goals. 3	4	ability 5	to mar	nage h	er/his t 8	ime and	d set schedules 10
6. This student papers for you 1 Please provide	ur class 2	(es). 3	4	ated wh	nen asl	ked to	comple 8	ete spe	ecial projects o
7. This student I in solving pro 1 Comments:		nonstra 3	ited the	ability 5	to reco	ognize 7	and pa	atterns 9	and apply them
8. This student h 1 Comments:	nas dem 2	nonstra 3	ted the 4	ability 5	to be a	ın activ 7	e learn 8	er in a 9	group situation 10
9. This student I 1 Comments:	nas shoʻ 2	wn res 3	pect an 4	id cour 5	tesy tov 6	ward oʻ 7	thers ir 8	n the cla	assroom. 10

				Nam	e of the	Stude	nt:				
10.	How well do on projects i				with oth	er stud	udents? The ability to work with oth				
	1 Comments:	2	<sup>'</sup> 3		5	6	7	8	9	10	
	How well wo 1 Comments:	ould this 2	studer 3	•			upervis 7		rironme 9	nt? 10	
12.	How would program?	this stu	udent	most	likely	penefit	from	partici	pating	in the	PICNICS
13.	Please add and/or extra application f	acurricula	ar acti	ivities	that co	ould sp	eak to	the a	appropr	iatenes	
YO	UR SIGNATI	JRE				NA	AME (P	RINT)			
ΥO	UR TITLE _		<del></del>			_	DA	TE			_
РΗ	ONE (OFFIC	E)									
	ease seal this plication.	s form i	n an e	envelo	pe, sig	n the	seal, a	nd ret	turn wi	th the	student's

THANK YOU FOR TAKING TIME TO COMPLETE THIS EVALUATION!