

# Confidential Academic Reference Form

## REQUIRED FOR ALL HECUA PROGRAMS

The academic reference must be an educator/instructor at a college/university level. Select a professor who can provide assessment of your ability to work and learn within a group. If questions are left blank and/or do not contain enough detail, you may be asked to produce a second or third reference.

Please return the completed form to HECUA at the address below or provide to student to include with application.

Higher Education Consortium for Urban Affairs  
2233 University Avenue West, Suite 210  
St. Paul, MN 55114

Tel: 651-646-8832 or 800-554-1089  
Fax: 651-659-9421  
Email: [hecua@hecua.org](mailto:hecua@hecua.org)

## APPLICATION DEADLINES

	Fall Programs	Spring Programs	January Term	Summer Programs
Study Abroad	March 15	November 1	October 1	March 15
Domestic Programs	April 15	December 1	November 1	April 15

Campus deadlines may differ from HECUA deadlines. Students are encouraged to contact their home institution to ensure that the required timeline and procedure is being followed.

Please note that student applications are not considered complete without an academic reference.

## TO BE COMPLETED BY THE STUDENT:

Student Name: \_\_\_\_\_

HECUA Program Title: \_\_\_\_\_

Term (e.g. Fall 2010): \_\_\_\_\_

College/University: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

## TO BE COMPLETED BY ACADEMIC REFERENCE:

**A. Acquaintance with applicant:** I have known the applicant for: \_\_\_\_ years, \_\_\_\_ months

**Check all that apply:**

- The applicant is/was in a class I teach.
- I know the applicant through discussions outside the classroom.
- I am an academic advisor to the applicant.
- Other (please specify): \_\_\_\_\_

**B. The success of a program relies on the successes of a HECUA learning community. It's imperative that references speak to a student's experience and preparedness for working through challenging issues in a group setting.**

Please indicate which side of the continuum you *most often* observe the applicant. Click a single box to the right of the appropriate number. Leave boxes unchecked if you are unfamiliar with the student's behavior in any area.

Seeks interaction with lots of people	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Seeks interaction with fewer people
Excels at group learning	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Excels at independent learning
Enjoys change	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Enjoys routine
Prefers to initiate projects	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Prefers to carry out projects
Processes thoughts, preferences, or ideas externally	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	Processes thoughts, preferences, or ideas internally

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### C. Recommendation:

Please respond to the following questions below on this sheet or in an attached letter of reference.

1. Comment on the student's motivation for participating in this HECUA program and ability/maturity to achieve those goals.

2. What situations cause the student stress? How does he or she respond to those stressful situations?

3. How does the student interact with others from a different backgrounds?

4. What are other important factors (concerns or otherwise) you would like to note about the student?

5. Based on your understanding of the program and assessment of the student, do you support the student's participation?

Enthusiastically support

Support

Support with reservation

Do not support

Reference Name:

Date:

Title:

Dept.:

Institution:

Address:

City:

State:

Zip:

Signature:

Telephone:

Email: