

Endorser Form

The College of Public Health Student Travel Grant

Please send this form directly from endorser to: sophie-switzer@uiowa.edu or N178 CPHB

Scholarship Applicant's Name:

Endorser:

- Name:
- Address:
- E-mail:
- Phone number:

How long have you known the student?

What has been your role(s) in this student's proposed activities?

Please rate your opinion of this student's abilities in the following areas:

	Superior (5)	Excellent (4)	Good (3)	Average (2)	Below Average (1)	Not Observed
Oral Communication						
Written Communication						
Quantitative Ability						
Ability to Interpret Data and Communicate Findings						
Research Skills						
Leadership						
Ethics						
Judgment						
Demonstration of Intellectual Curiosity						
Works effectively with others from different viewpoints and backgrounds						
Demonstrates sensitivity and respect for personal and cultural difference						
Uses critical thinking and comparative skills to think creatively and integrate knowledge from multiple points of view						

Please provide a *brief* (150 word max) description in support of your scoring above.

Signature

Date