Lycoming College Robert Noyce Teacher Scholarship
Confidential Recommendation Form

Applicant’s Name: _____________________________________________

Waiver of Access to Recommendation Form

To the applicant:
Please list your full name in the appropriate spot above, check off the option you prefer below, and sign your name. If you do not check off either statement below, we will consider this as waiving your right to access.

___ I waive my right to view this recommendation.

___ I do not waive my right to view this recommendation.

Applicant’s signature: ________________________________________   Date: _____________

To the recommender:
The person whose name appears above has applied for the NSF-funded Robert Noyce Teacher Scholarship Program at Lycoming College. The Noyce Scholarship Program is aimed at recruiting science and math teachers and specifically preparing them to teach in high-need areas. Recipients of the grant must agree to commit to two years of teaching in a high need school for each year they receive the scholarship. The scholarships can be awarded for no more than two years per student.

The term high-need local educational agency means a local education agency (for example, a school district), that includes an elementary or secondary school with 1) a high percentage of individuals from families with incomes below the poverty line, 2) a high percentage of secondary school teachers not teaching in the content area in which they were trained to teach; or 3) a high teacher turnover rate.

The selection committee sincerely appreciates your time on this student’s behalf. Please complete this short form and provide any additional comments you feel will help the committee make an informed decision regarding the applicant. Noyce Scholars will be selected based on strong content knowledge in math or science and the potential to be a successful teacher in a high need area.
Compared to other students you have worked with, how would you rate the applicant’s:

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<thead>
<tr>
<th></th>
<th>Below Average</th>
<th>Average</th>
<th>In the top 25%</th>
<th>In the top 10%</th>
<th>In the top 1-2%</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td>Content knowledge in STEM major</td>
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<td>2.</td>
<td>Ability to work as part of a team</td>
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<td>3.</td>
<td>Oral communication skills</td>
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<td>4.</td>
<td>Written communication skills</td>
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<td>5.</td>
<td>Ability to maintain a minimum 3.0 GPA</td>
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<td>6.</td>
<td>Ability to pass a test of basic reading, writing, and math skills</td>
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<td>7.</td>
<td>Empathy/Concern for others</td>
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<td>8.</td>
<td>Organizational skills</td>
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<td>9.</td>
<td>Time management skills</td>
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<td>10.</td>
<td>Ability to act professionally and ethically</td>
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<td>11.</td>
<td>Initiative</td>
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<td>12.</td>
<td>Leadership skills</td>
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<td>13.</td>
<td>Willingness to accept and act on feedback</td>
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<td>14.</td>
<td>Ability to work successfully with adolescent learners</td>
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In what capacity have you known the applicant:
______________________________________________________________________________________
______________________________________________________________________________________
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______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

For how long have you known the applicant: _________________________________
Please include any additional comments regarding the applicant’s potential as a Noyce Scholar:

Reference Information:

Name: _______________________________________________________________________
Position: ____________________________ Institution: _______________________________
Email: _________________________      Phone Number: ______________________________
Address: _____________________________________________________________________
Signature: _________________________________________________ Date: _____________

Please submit this completed reference form in its entirety to:

Dr. Rachel Hickoff-Cresko  
Chair, Education Department  
Lycoming College  
700 College Place  
Campus Box 22  
Williamsport, PA 17701  
Office: Academic Center D-208  
hickoff@lycoming.edu  
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