



ASBMB Undergraduate Research Award reference form

TO THE APPLICANT: Complete the top portion of this form and present it to your reference.

Applicant's name: _____

Applicant's institution: _____

Under the Family Education Rights and Privacy Act of 1974 (FERPA), you may access and review this evaluation unless you explicitly waive this right. Select one of the choices below:

___ I **WAIVE** my right to access and review this letter of evaluation at any time.

___ I **DO NOT WAIVE** my right to access and review this letter of evaluation at any time.

Signature of Applicant

Date

TO THE EVALUATOR:

Thank you for your willingness to provide a candid evaluation of this applicant for the ASBMB Undergraduate Research Award. Your recommendation should include this form and a letter of support that is typed on institutional letterhead with your signature and title.

This letter should address the student's (1) academic achievements and (2) previous research experience. Submit this form and a letter of support to education@asbmb.org.