

**BURTON GRANTS FOR LANGUAGE STUDY ABROAD  
FACULTY RECOMMENDATION FORM  
SUMMER PROGRAM**

**A. To the student**

Please complete this part of the form before giving to recommender

Name \_\_\_\_\_ Class \_\_\_\_\_

Summer language program to which you are applying \_\_\_\_\_  
\_\_\_\_\_

**B. TO THE RECOMMENDING TEACHER. Please return completed form to BURTON COMMITTEE.**

Which courses has this student taken with you? \_\_\_\_\_  
\_\_\_\_\_

How recently has this student been in your class? \_\_\_\_\_

Please indicate the level that best describes the student's present control of the language she or he intends to study.

	SPEAKING	UNDERSTANDING	WRITING
Uses and understands sophisticated or complex levels of language			
Uses and understands conventional syntax and vocabulary			
Uses and understands simple vocabulary and basic structures			
Shows little functional Ability			

RECOMMENDATION—PLEASE CHECK ONE

STRONGEST

NO RESERVATION

SOME RESERVATIONS

COMMENTS?

NAME \_\_\_\_\_ DEPT. \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_