

**2012 PRISM GRADUATE FELLOWSHIP APPLICATION
PART C: MENTOR SUPPORT MATERIALS**

TO THE STUDENT APPLICANT: Complete the top section of this form and provide it to the recommender (your research advisor/mentor). Make sure that the recommender understands the PRISM program and the fellowship requirements. Also make sure your recommender is aware of the application deadline you are trying to meet.

I understand that federal legislation provides me with a right of access to this recommendation, which may be waived, but that no school or person can require me to waive this right. Check one of the following statements:

- I hereby WAIVE my right of access to this recommendation.
 I do NOT waive my right of access to this recommendation.

Student Name (please print): _____

Student's Signature: _____ Date: _____

— INSTRUCTIONS TO THE RECOMMENDER —

PLEASE SIGN BELOW to indicate your awareness of the following:

- Participation in PRISM requires a time commitment that typically fluctuates from week to week, but averages 12 hrs/wk, and includes a two-week summer institute (June 18-29) and three planning days (one each in July, September, and January).
- Students who plan to enroll in classes or participate in a teaching assistantship during the fellowship period require permission from PRISM administrators prior to participating.
- PRISM Fellows receive \$10,000 applied toward their annual stipend from June-December 2012.

Faculty Name (please print): _____

Faculty Signature: _____ Date: _____

IN A SEPARATE LETTER please comment on the applicant's motivation, independence, creativity, ability to communicate orally and in writing, ability to work with adults, peers, and children, and any other information you feel would be appropriate. Your thoughtfulness in providing this information is appreciated.

If the student waives his or her right of access to this recommendation, the recommendation, except as used by the PRISM Selection Committee, will be held in confidence from the student and all other parties. If the student does not waive his or her right and is awarded the fellowship, or if the student does not sign either statement above and is awarded the fellowship, the student will be permitted to see the recommendation on request.

**Enclose your letter with this form and scan/email (preferred), deliver, or mail
by April 2, 2012 to:**

**PRISM, c/o Jordan Rose
Emory Center for Science Education
1399 Oxford Road
Atlanta, GA 30322
jrose14@emory.edu**

FOR MORE INFORMATION contact Dr. Pat Marsteller (404-727-9696) or visit our website at www.prism.emory.edu