California Academy of Sciences Summer Internship Recommendation Form

To be filled out by the applicant: Name of applicant: first middle last Internship being applied for (check one): Summer Systematics Institute Biological Illustration Applicant's waiver of right of access to confidential statement: the information given in this recommendation will be confidential ONLY if the following waiver has been signed by the student. In accordance with the Family Rights and Privacy Act of 1974. _____, hereby freely and voluntarily waive my right of access to any information contained on this recommendation form and agree that the statement shall remain confidential. signature date

To the recommender:

The person named above is applying for an internship with the California Academy of Sciences' Summer Internship Programs. Your estimate of the applicant's aptitude, motivation, and general character would be greatly appreciated. Please provide your recommendation in the spaces provided on the following page. We greatly appreciate and value your input to this important part of our application process. Many thanks.

Note: applications lacking a letter of recommendation post-dated by the stated deadline will not be reviewed for a position in the CAS Summer Internships Program.

Once you have completed the recommendation form, please either place in an envelope signed across the seal and have the applicant include it with their application materials, or mail this recommendation separately before February 13 to:

Summer Internships c/o Dr. Rich Mooi California Academy of Sciences 55 Music Concourse Drive San Francisco, CA 94118

Telephone: 415-379-5270 email: rmooi(at)calacademy.org

date

signature