



LEHMAN
COLLEGE

THE DIVISION OF EDUCATION
MASTER PROGRAM

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Lehman Robert Noyce Scholarship: The Mathematics and Science Teacher Education Recruitment (MASTER) Program Recommendation Form for Fall 2010

To the Applicant:

Please complete the top portion of this recommendation form and give it to your professor for a recommendation. A recommendation printed on college stationery is also acceptable but should be attached to this form when submitted to The MASTER Program.

First Name Middle Last Name

Address State Zip code

City Email

Home Phone

Number of credits completed

Expected Graduation Date

I am aware of the rights afforded to me by the federal Educational Rights and Privacy Act of 1974, as amended. I hereby do do not waive my right to examine the contents of this reference form. I understand that by waiving my right I do so under the condition that the reference form is used solely for the purpose for which it is intended.

To the professor

This student is applying for admission to The Lehman MASTER Program. Your comments are important to the selection process. Please return the recommendation form to the applicant in a sealed envelope.

Name

Subject(s) taught

Telephone E-mail

Affiliation

Address

How long have you known this student? Signature _____

Please comment on why you think this student would be an effective math or science educator in a New York City public middle school. (You may write your recommendation on a separate sheet of paper. Please attach this information page as a cover sheet.)

