



## PERSONAL & PROFESSIONAL REFERENCE FORM

We recommend our participants request references from university professors, employers, student organization leaders, or family friends who can provide an unbiased reference. The recommendation provided is an essential part of the application for participation in AIDE's programs. Not all applicants are equipped to succeed in every program and every attempt is made to help select a program that is not too physically or emotionally demanding. Your thoughtful comments and completion of this reference form will enable the staff to make appropriate placements. Both the applicant and AIDE appreciate your cooperation.

Name of Applicant: \_\_\_\_\_

How long have you know the applicant? \_\_\_\_\_

What is your relationship to the applicant? \_\_\_\_\_

Please give your opinion of the applicant's ability to handle new situations and possible stress:

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Please rate the applicant in each of the following areas in terms of his/her personality and suitability for working and living in a foreign country (1=Outstanding, 2=Good, 3=Fair, 4=Needs improvement):

- |   |  |                                      |                                       |
|---|--|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Cooperation    | <input type="checkbox"/> Communication | <input type="checkbox"/> Skills      | <input type="checkbox"/> Energy       |
| <input type="checkbox"/> Humor          | <input type="checkbox"/> Flexibility   | <input type="checkbox"/> Leadership  | <input type="checkbox"/> Organization |
| <input type="checkbox"/> Responsibility | <input type="checkbox"/> Initiative    | <input type="checkbox"/> Sociability | <input type="checkbox"/> Tolerance    |
| <input type="checkbox"/> Punctuality    |  |                                      |                                       |

Please describe the applicant's adaptability, maturity and initiative. What do you see as his/her greatest strengths/weaknesses?

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Are there any reasons why you feel the applicant would NOT be successful in this program?

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To the best of your knowledge, has the applicant suffered any significant physical or nervous difficulties? If yes, please explain.

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Your Name: \_\_\_\_\_

Position: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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