



**IFLEED INSTITUTE OF MATH AND SCIENCE LLC**  
**Student Reference Form**

**Internship for High School STEAM program 2020-2021**

Ifleed Institute of Math and Science STEAM program

C/O Shanthi Ayyadhury

Email: shanthi@ifleedinstitute.com

Tel: (715) 600-1851

Student name: \_\_\_\_\_ Grade level in Fall 2020: \_\_\_\_\_

Please add any information you would like us to consider in evaluating this student.

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Please indicate one of the following:

\_\_\_\_\_ I recommend this student without reservation

\_\_\_\_\_ I recommend this student with reservation\*

\_\_\_\_\_ I do not recommend this student\*

\* If you have reservations or do not recommend the student, please explain:

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Print Name: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_



# IFLEED INSTITUTE OF MATH AND SCIENCE LLC

Thank you for your cooperation.

\_\_\_\_\_ has identified you as a reference on his/her application to participate in the Ifleed Institute of Math and Science Internship STEAM program. Please complete this reference form, sign and email it to

**Shanthi Ayyadhury (Founder/Managing Director) at shanthi@ifleedinstitute.com**

How long have you known this student? \_\_\_\_\_

Please rate this student’s academic performance in comparison to his/her peers:

superior                                      good                                      average                                      poor

Please rate this student’s overall character in comparison to his/her peers: superior good average poor

On a scale of 1 (lowest) to 5 (highest), rate the student on the following:

_____ self discipline	_____ originality	_____ academic ability
_____ ability to follow directions	_____ leadership	_____ integrity
_____ initiative	_____ independence	_____ professionalism
_____ cooperation	_____ reliability	_____ work ethic