

UC Riverside GFI Fellowship Reference Form

Applicant Information

Name					
Address					
Email address					
Above to be filled o	ut by applicar	nt			
Below to be filled or	ut by referenc	e			
The person named above is a candidate for the awarded for exceptional projects that contribute campus or broader community about the importa ONLY Projects addressing one or more of the the will be considered.	to improved hance of acces	nealth and nuss to and pro-	utrition and/o duction of he	r educate the	
Fellows are expected to attend regularly schedu throughout the UC system, and to present their or You have received this form because the Application	completed pro	ojects at UC0	OP sponsore	d events.	
Please fill out the information below and email the 2017 .	ie document a	as a pdf to P	eggy.Mauk@	oucr.edu by Monda	ay, May 22,
Professional relationship to applicant (mentor, pr	rofessor, supe	ervisor, etc.):			
Level of experience applicant has with GFI-relate	ed work:				
Brief description of work performed by the applic	ant from whic	ch your asse	ssment is ba	sed upon:	
	Cycellent	Cood	Door	Linknown	
Quality of Professional work	Excellent	Good	Poor	Unknown	
A. GFI-Related Knowledge					
B. Professional Skills & Attitude					
C. Time Management / Dependability					
Please provide any detailed comments (optional) on the following page.					
Reference					
Full Name					
Title					
Department					
Email Address		 			
Signature	Date				



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Additional Comments Page

Applicant Name:		
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Comments:		