**Please Circle**:  **I do I do not waive any right of access I may have to this reference form.**

**Student signature**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name: ­­­­­­­­­­­­­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STATEMENT OF RESIDENT DEAN, FRESHMAN ADVISER OR DESIGNEE**

The Committee on Special Concentrations recognizes that no Resident Dean can comment authoritatively on every student's academic specialty. We do rely, however, upon your understanding of the students themselves.

How would you assess the applicant's maturity, initiative, discipline, and perseverance? Can he or she dispense with the collegiality, advice and support that a departmental concentration provides?

If you do not know the student well, please suggest someone better able to comment on him/her.

**Please feel free to attach additional pages to this sheet.**

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

**Name and House: (Please print)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(The Committee on Special Concentrations appreciates the care and candor with which you will reply.)

Return to Lisa Laskin, 1414 Mass Ave, floor 3r, room 364, OR email to specialconc@fas.harvard.edu