

**LUDWIG FELLOWSHIP APPLICATION FORM 3: GRADUATE MENTOR RECOMMENDATION**

**To be filled out by mentor.** Please send separately to fellowships@lcr.org. All recommendations will be kept confidential.

Applicant's name: \_\_\_\_\_

Mentor's name: \_\_\_\_\_

Department: \_\_\_\_\_

Institution: \_\_\_\_\_

1-Describe the research performed by the applicant while in your laboratory. Indicate their level of independence and their unique scientific contributions.

2-Indicate applicant's top 3 strengths (explain as necessary).

1)

2)

3)

3-Indicate applicant's top 3 weaknesses (explain as necessary).

1)

2)

3)

4-Applicant's rank.

Of the \_\_\_ students I have mentored in my laboratory, the applicant ranks # \_\_\_\_.

**Mentor's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_