

## J-1 Student Intern Program Academic Advisor (Home Institution) Recommendation Form

Section I: To Be Completed by the Student Intern:

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

*I hereby grant permission for the information provided on this form to be forwarded to Brandeis University.*

**Student Intern's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Section II: To Be Completed by the Academic Advisor at the Student's Home Institution:

**Advisor's Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Advisor's Email Address:** \_\_\_\_\_

**Name of Institution:** \_\_\_\_\_

**Institution's Mailing Address:** \_\_\_\_\_

**Degree that the student is currently pursuing at your institution:** \_\_\_\_\_

**Student's estimated graduation date at your institution:** \_\_\_\_\_

*By signing this letter, I certify the following:*

- *This internship will fulfill the educational objectives for the intern's current degree program at his/her home institution.*
- *I certify that the student will be earning credit or fulfilling a requirement of their undergraduate degree program*
- *I approve this student's participation in the internship at Brandeis University.*

**Advisor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_