

G-TEAMS Fellowship Application – GRADUATE ADVISOR LETTER

Name of Applicant: _____ Graduate Program: _____

Name of Graduate Advisor: _____

Name of Graduate Chair: _____

To the Graduate Chair:

Please confirm that you are aware of and support the application of the student named above to the G-TEAMS program by signing below.

Signature of Graduate Chair: _____ Date: _____

To the Graduate Advisor:

Please attach a letter of recommendation, giving your assessment of the applicant's abilities as a mathematical scientist, the progress of his/her research, and your impressions of his/her capacity as a teacher and communicator. In addition, please read and sign the following:

I support the application of _____ (applicant's name) to the G-TEAMS Graduate Fellowship Program. I understand that participation in this program will require the fellow to spend 15 hours per week preparing lessons and teaching in a K-12 classroom. I understand that more information will be provided once the student has been accepted in the program.

Signature of Graduate Advisor: _____ Date: _____

Applications are due January 31, 2013.

Please have your letter of recommendation sent to:

G-TEAMS Graduate Application
Alejandra Gaona
Institute for Mathematics & Education
Department of Mathematics
University of Arizona
617 N. Santa Rita
Tucson, AZ 85721

Telephone: 520-626-6145

Email: ime@math.arizona.edu

If you have questions about the G-TEAMS fellowship or application process, please contact:

Dr. Joceline Lega,
Department of Mathematics
Institute for Mathematics & Education
Gould-Simpson 839
Email: lega@math.arizona.edu