KANSAS/ASIA SCHOLARS

REFERENCE
DUE NO LATER THAN FRIDAY, SEPTEMBER 30, 2005

To be completed by student

Note to applicant: Please indicate your name, KUID, and country program. It is your option to sign the Student Waiver Statement.

______________________________  Country (circle one):  China  Japan
Name of Applicant  KUID

Student Waiver Statement

I understand my right under the provisions of PL 93-380-.513 (Family Educational Rights and Privacy Act of 1974) to inspect letters of recommendation written on my behalf. In order to encourage the authors of letters about me to write with candor, I have elected not to exercise my rights under this statute and affirm that I shall not do so in the future. I understand that this document will be used only for the purposes of evaluating my qualifications for the KAS program by the University of Kansas program administrators and/or selection committee members, and cooperating institutions, and will not be available to any other institution, organization or party.

______________________________________ ______ _______________
Applicant Signature      Date

To be completed by referee

Participants in the Kansas/Asia Scholars program will be chosen on the basis of their academic records, personal qualifications, and evaluations by instructors. In addition to academic potential, KAS students will require maturity and a cooperative spirit, particularly while representing the University in the study abroad and service learning aspects of this program.

Please indicate how long and in what capacity you have known this applicant. Describe how well you think this applicant will make use of this opportunity, taking into consideration his/her character, adaptability, stability, and academic competence in comparison with other students at similar stages in their careers. If you have knowledge of the student’s demonstrated interest in Asia, relevant linguistic preparation, leadership potential, or any other factors that you believe may impact upon a successful study abroad and service learning experience for this student, please comment on these questions as specifically as possible.

(Over)

04/13/05
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<thead>
<tr>
<th>Referee’s Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Name (please type or print clearly)</td>
<td>Position/Title</td>
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<td>Office Address</td>
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<td>Institution</td>
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Please return this form directly to: Center for East Asian Studies, Bailey Hall, 1440 Jayhawk Blvd., Rm. 201, University of Kansas, Lawrence, KS 66045-7574
Tel: 785-864-3849. Faxed letters are acceptable. Fax: 785-864-5034.