



United States Department of Agriculture
Animal and Plant Health Inspection Service
 Office of Civil Rights, Diversity, and Inclusion

AgDiscovery 2019

LETTER OF RECOMMENDATION

STUDENT'S NAME

Student: Please give this Letter of Recommendation to three (3) adults (one must be a teacher or counselor), who know you, and are familiar with your school work, interest in agriculture, and work qualities. For example, a supervisor, teacher, school counselor, coach, or minister, who is **NOT A RELATIVE** of yours. **Please fill in your name on the top of the form, and the name of the university for which you are applying, below.**

Respondent: The student named on this form is being considered for participation in the AgDiscovery Program, a summer enrichment program at _____ University, sponsored by the United States Department of Agriculture, Animal and Plant Health Inspection Service. Please complete this form on his/her behalf, and return to the student **before March 15, 2019**. You may use a separate sheet of paper, if needed.

Your Name		Title	
Your Relationship to Applicant			
Address	Street		
	City	State	Zip Code
Telephone	()		

Please address the questions listed below:

- How do you know the student?

- How long have you known the student?

- What do you know about the student's character, ambition, aptitude for learning, and interest in agriculture?

Signature of Respondent: _____ **Date:** _____

The information you provide is confidential. Letters of recommendation must be postmarked or received at USDA by **March 15, 2019** in order for the student to receive full consideration.