REFEREE 2

FOR SEG OFFICE USE ONLY GSF Application No. GSF 24-\_

7811 Shaffer Parkway • Littleton

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## **Graduate Student Fellowship (GSF) Application – 2024**

Part 3 of 3, Reference 2: Appraisal of Application

Name of Stude	ent			
Referee No. 2	Name			
If Ref	feree is an SEG Member, please provide	their Member ID		
Address				
Address				
City	State	Postal Code	Country	
Phone		Fax		
E-mail				
Ranking of app	plicant compared with other students yo	u have known.		
Lower 50%	Upper 50% Upper 25%	Upper 10% Upper 5%		
Equal ranking	ommending more than one applicant, please ran gs are not useful. All applicants have the same of e a statement of the individual student's strengt	chance for support; a quota system is n		
Has student ac	equired or applied for funding from any o	other source? Yes No		
If yes, please p	provide details			
Evaluation of a	applicant (please include relevant experi	ence, if any):		
Signature of R	eferee No. 2	Da	nte	

Click for Adobe electronic signature instructions

Please submit your completed reference to SEGF GSF Program at: students@segweb.org by February 1, 2024 For confidentiality, do not return the completed Reference to the Applicant.

