

TCD Graduate Assistantship Support Letter

Thank you for agreeing to provide a support letter to the TCD Graduate Assistantship Selection Committee.

TCD is not a degree granting program, but rather offers an interdisciplinary certificate to students enrolled in Master's or Ph.D. programs, spanning 25 academic units at UF. TCD complements the knowledge and skill sets that students develop in their home units, emphasizing student learning outside their immediate discipline and the ability to think in terms of linked social-ecological systems, work in teams, communicate in nonacademic formats, and reflect critically on their own perspectives and actions. The TCD Program offers an extensive range of classroom and field opportunities for students committed to an interdisciplinary understanding of biodiversity conservation, sustainable resource use, and human well-being issues in the tropics, including sub-tropical and temperate areas in developing countries (e.g., southern Africa, southern cone of South America, Greater Himalayan region). More information regarding TCD Graduate Assistantships can be found [here](#).

Name of Student Applicant: _____

Name of Advisor: _____

Institution/Organization of Referee: _____

Email of Referee: _____ **How long have you know the applicant:** _____ years

In what capacity do you know the applicant: _____

Please comment on the following selection criteria in the spaces below:

- 1) Why do you think the applicant's research/academic interests and approach match those of the TCD program (e.g., multi- or interdisciplinary approaches that integrate biological conservation, local peoples, and/or natural resource management)?

2) Leadership potential in conservation and development, including potential to have future impact in their professional career. If possible, please provide an example of why you think the student has leadership potential.

3) If applicant is already enrolled in UF and the TCD program, please comment on contributions of the student to TCD activities and community.

4) Are you able to offer departmental or other support? If so, please indicate what assistance can be provided?

5) Please feel free to add any additional comments in the space below.

To the best of my knowledge, I attest that the information provided above is accurate.

Signature

Name

Date

Please send the signed form to the [TCD Program](#) directly. If you have a problem completing this form or have any questions, please [send us a message](#). The use of this form is preferred.

Thank you!!