

RECOMMENDATION FORM

Higher Education Unit Miriam College

KATIPUNAN AVENUE, LOYOLA HEIGHTS, QUEZON CITY 1106
www.mc.edu.ph

NAME OF APPLICANT _____
Name in Birth Certificate LAST FIRST M.I.

SCHOOL _____ YR & COURSE _____

TO THE PERSON RECOMMENDING:

Please fill this out completely. We would benefit from your perspective in providing us with your impressions of the applicant's personal qualities and contribution to your school community. This form is a confidential report written on behalf of the applicant named above and will be used solely for admission purposes. Please put in an envelope, sealed and signed.

Personal Contact with the Student
Teachers' Comments
Others' Observations
Guidance Records/ Guidance Test Results
Others _____

This report is based on: Please check (✓)

I. GENERAL EVALUATION

Check(✓) the most appropriate box. If you wish to give reasons for any of your ratings, please do share. We would find an explanation for the significance of any rating to be very helpful.

PERSONAL TRAITS	NO BASIS FOR JUDGEMENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	POOR
<i>Intellectual Capacity</i>					
<i>Critical Thinking</i>					
<i>Self confidence/ Ability to deliver</i>					
<i>Independence/ Decision Making Ability</i>					
<i>Leadership/ Influence</i>					
<i>Initiative/ Motivation</i>					
<i>Responsibility</i>					
<i>Integrity</i>					
<i>Energy and Enthusiasm</i>					
<i>Creativity</i>					
<i>Concern For Others</i>					
<i>Emotional Stability</i>					
<i>Respect accorded by Peers</i>					

II. PLEASE ANSWER THE FOLLOWING QUESTIONS BRIEFLY:

1. Based on your observations, what are the students' skills and potentials?

2. Did the student manifest any behavioral difficulties or challenges? If yes, how did she manage it?

3. Please describe any accomplishments or personal circumstances that we should know about the student.

OVERALL RECOMMENDATION (Please check one)

- Strongly recommended** for admission
- Recommended** for admission
- Recommended **with reservation** (*Please state reasons*)
- Not recommended** for admission (*Please state reasons*)

PRINTED NAME OF PERSON ACCOMPLISHING REPORT _____

SIGNATURE _____

POSITION _____

SUBJECT TAUGHT _____

SCHOOL _____

CONTACT NO. _____

REGISTRAR'S NAME AND SIGNATURE _____