



# MIRIAM COLLEGE LOWER SCHOOL

U.P. P.O. BOX 110 Diliman, Quezon City 1101 PHILIPPINES

## RECOMMENDATION for STUDENT APPLICANTS

To be filled out by the Homeroom Adviser

NAME OF STUDENT \_\_\_\_\_  
Family Name Given Name Middle Name

Name of Last School \_\_\_\_\_

School Address \_\_\_\_\_ Tel. No. \_\_\_\_\_

Grade Applying for \_\_\_\_\_

**To the Homeroom Adviser:**

The student whose name appears above is applying for admission to MIRIAM COLLEGE LOWER SCHOOL. Your thorough evaluation will help the Admissions Committee in making final selections for admission. Please feel free to include any pertinent information, as this shall be dealt with utmost confidentiality.

### The Applicant's Qualities

Please assess the applicant by checking the appropriate boxes.

	Excellent	Above Average	Average	Below Average	Poor
Ability to learn					
Intellectual capacity					
Ability to work independently					
Ability to work with others					
Communication Skills					
Self-confidence					
Social Relationship					
Leadership Potential					
Self-discipline					

## The Applicant's Performance

Based on the entire batch, the applicant belongs to:

Top 10 %     Upper 25%     Middle 50%     Lower 25%

1. Has the applicant been involved in any disciplinary cases? \_\_\_ Yes \_\_\_ No  
If yes, please describe

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2. What do you consider to be the applicant's strengths?

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3. In what areas can the applicant improve on?

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4. Has the applicant had any family/peer problem(s) that may have had an effect on the student? \_\_\_ Yes \_\_\_ No  
If yes, please describe

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### OVERALL RECOMMENDATION (please check one)

Strongly recommended                       Recommended w/ reservation  
 Recommended     Not Recommended

How long have you known the applicant? \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Designation: \_\_\_\_\_

Contact No.: \_\_\_\_\_

Date: \_\_\_\_\_

Please affix school  
dry seal here

**Thank you for completing this recommendation form. Please return this form in a sealed envelope with your signature across the flap. Should there be a need for clarification, please do not hesitate to contact us at tel. Nos. 580-5400 to 31 local 3212.**