

Teacher Recommendation



APPLICANT INFORMATION

Fill in your name and address below; then give this form and a stamped envelope, addressed to Albright College, to a teacher who has taught you an academic subject in your junior or senior year.

Student's name _____
(last name) *(first name)*

Address _____
(street) *(city)* *(state)* *(zip code)*

TEACHER

We are grateful for your assistance on behalf of this applicant. We are interested in what you think is important about the applicant's academic and personal qualifications for college. If you prefer, you may submit a letter of recommendation in lieu of this form.

Teacher's name (please print or type) _____

School name _____ E-mail _____

Position/Department _____ Telephone # (_____) _____
area code

BACKGROUND INFORMATION

List the course(s) you have taught this student, noting for each the student's year (10th, 11th, 12th) and the level of course difficulty (A.P., accelerated, honors, regular, elective, etc.):

How long have you known the applicant, and in what context? _____

What are the first words that come to your mind to describe the applicant? _____

RATING

	Below Average	Average	Good	Excellent	Outstanding (Top 2-3%)	No Basis for Judgment
Creative, Original Thought						
Motivation						
Maturity						
Independence, Initiative						
Intellectual Ability						
Academic Achievement						
Written Expression of Ideas						
Effective Class Discussion						
Disciplined Work Habits						
Potential for Growth						

RECOMMENDATION

We welcome information that will help us differentiate this student from others. Please write whatever you think is important about this student, including a description of academic and personal characteristics.

SUMMARY EVALUATION

I recommend this candidate for admission to Albright College:

	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically
For academic promise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
For character and personal promise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall recommendation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Signature _____ Date _____

RETURN TO: ALBRIGHT COLLEGE, ADMISSION OFFICE, THIRTEENTH & BERN STREETS, P.O. BOX 15234, READING, PA 19612-5234