

2017 RECOMMENDATION FORM CHARACTER REFERENCE

(To be completed by an adult who knows the applicant well. A recommendation from family member is not acceptable.)

*Please print in English using a pen with black or blue ink (no pencil). Typing is also acceptable.
The envelope must be sealed and signed/stamped across the seal by a school official.*

Date: _____

Applicant's name: _____

Applicant's present address: _____

Parent/guardian: _____

Applicant is currently enrolled in grade: _____ th grade

(If already transferred, applicant was enrolled in grade: _____ th grade)

How long have you known that applicant? _____

Note the capacity in which you have known the applicant: _____

[Evaluation]

Please check the appropriate box for each question.

	Unknown or Does not Apply	Below Average	Average	Good above Average	Very Good	Excellent	Top Few
Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moral/Social Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to improve him/herself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperativeness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to help others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honesty/Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall evaluation as a person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 1) If the student is relatively weak or strong in any areas listed above, please elaborate.

- 2) Please add any additional information that will give us a more complete picture of the student. Please attach an extra sheet, if necessary.

SAMPLE

*** Please fill out all the information below.**

Name of the recommender _____ Signature _____
Name of organization _____ Phone _____
Address of organization _____ Email _____