

The member colleges and universities fully support the use of this form. No distinction will be made between this form and a college's own. Please type or print in black ink.

TO THE APPLICANT

After completing all the relevant questions below, give this form to an instructor who has taught you a full-credit college class. Please also give that instructor stamped envelopes addressed to each institution that requires an Instructor Evaluation.

Birth date _____ Social Security No. _____
mm/dd/yyyy *(Optional)* ☐ Male ☐ Female

Legal name _____
*Enter name **exactly** as it appears on passports or other official documents. Last/Family First Middle (complete) Jr., etc.*

Address _____
Number and Street Apartment # City or Town State/Province Country Zip/Postal Code

College or university you now attend _____ CEEB/ACT code _____

IMPORTANT PRIVACY NOTICE: Under the terms of the Family Education Rights and Privacy Act (FERPA) you WILL have access to your recommendation after you matriculate UNLESS at least one of the following is true:

1. The institution does not save recommendations post-matriculation (*see list at www.commonapp.org/FERPA*).
2. You waive your right to access below:
 - ☐ Yes, I *do* waive my right to access, and I understand I will never see this recommendation.
 - ☐ No, I *do not* waive my right to access and may someday choose to review this recommendation.

 _____
Signature

Date

I authorize all colleges and universities I've attended to release all requested records and authorize review of my application for the admission process indicated on this form.

 _____
Signature

Date

TO THE INSTRUCTOR

The Common Application membership finds candid evaluations helpful in choosing from among highly qualified candidates. A photocopy of this reference form, or another reference you may have prepared on behalf of this student, is acceptable. You are encouraged to keep the original of this form in your private files for use should the student need additional recommendations. Please return it to the appropriate admission office(s) in the envelope(s) provided you by this student. Please submit your references promptly. **Be sure to sign on the reverse.**

BACKGROUND INFORMATION

How long have you known this student and in what context?

What are the first words that come to your mind to describe this student?

List the courses you have taught this student, noting for each the student's year in school (first-year, sophomore, etc.) and the level of course difficulty (100-level, 200-level, etc.).

RATINGS

Compared to other students to whom you have taught this class, how do you rate this student in terms of:

	No basis	Below average	Average	Good (above average)	Very good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
	Academic achievement							
	Intellectual promise							
	Quality of writing							
	Creative, original thought							
	Productive class discussion							
	Respect accorded by faculty							
	Disciplined work habits							
	Maturity							
	Motivation							
	Leadership							
	Integrity							
	Reaction to setbacks							
	Concern for others							
	Self-confidence							
	Initiative, independence							
	Overall							

EVALUATION

Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)

Instructor's name (Mr./Ms./Dr., etc.) _____ Title _____
Please print or type

College or University _____

School address _____
Number and Street City or Town State/Province Country Zip/Postal Code

Instructor's phone (_____) _____ Instructor's e-mail _____
Area Code Number Ext.



Signature

Date

The member colleges and universities fully support the use of this form. No distinction will be made between this form and a college's own. Please type or print in black ink.

TO THE APPLICANT

After completing all the relevant questions below, give this form to a college official at your institution. **This form must be completed by a dean or other college official who has access to your disciplinary record and to your academic record.** Please also give that school official stamped envelopes addressed to each institution that requires a College Official's Report.

Birth date _____ Social Security No. _____ ☐ Male
mm/dd/yyyy (Optional) ☐ Female

Legal name _____
Enter name **exactly** as it appears on passports or other official documents. Last/Family First Middle (complete) Jr., etc.

Address _____
Number and Street Apartment # City or Town State/Province Country Zip/Postal Code

Current year courses—please indicate title, level and credit value of all courses you are taking this year.

First Semester/Quarter	Second Semester/Quarter	Third Quarter
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IMPORTANT PRIVACY NOTICE: Under the terms of the Family Education Rights and Privacy Act (FERPA) you WILL have access to your recommendation after you matriculate UNLESS at least one of the following is true:

1. The institution does not save recommendations post-matriculation (*see list at www.commonapp.org/FERPA*).
2. You waive your right to access below:
 - ☐ Yes, I *do* waive my right to access, and I understand I will never see this recommendation.
 - ☐ No, I *do not* waive my right to access and may someday choose to review this recommendation.

Signature _____ Date _____

I authorize all colleges and universities I've attended to release all requested records and authorize review of my application for the admission process indicated on this form.

Signature _____ Date _____

TO THE COLLEGE OFFICIAL

Do you have access to the applicant's disciplinary record and academic record? If not, then you are not eligible to complete this form. Please return it to the applicant. Attach applicant's official transcript, including courses in progress, and transcript legend. (Please check transcript copies for readability.) After filling the blanks below, use both sides of this form to describe the applicant. Please provide all available information for this candidate. **Be sure to sign on the reverse.**

Class rank: _____ in a class of _____, covering a period from _____ to _____
(mm/yyyy) (mm/yyyy)

The rank is ☐ weighted ☐ unweighted. How many students share this rank? _____

☐ We do not rank. If a precise rank is not available, please indicate decile _____.

Cumulative GPA: _____ on a _____ scale, covering a period from _____ to _____
(mm/yyyy) (mm/yyyy)

This GPA is ☐ weighted ☐ unweighted. The school's passing mark is _____.

Highest grade/GPA in class _____

School Seal

RATINGS

Compared to other students in his or her class year, how do you rate this student in terms of:

	No basis	Below average	Average	Good (above average)	Very good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few encountered in my career
	Academic achievement							
	Extracurricular accomplishments							
	Personal qualities and character							
	Overall							

EVALUATION

Please write whatever you think is important about this student, including a description of academic, extracurricular, and personal characteristics. We welcome a broad-based assessment that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)

How long have you known this student and in what context? _____

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

Why is this student transferring? _____

① Is this applicant in good academic standing? ☐ Yes ☐ No

② Is this applicant eligible to return to your school? ☐ Yes ☐ No

If you answered no to either or both questions, please attach a separate sheet of paper or use your written recommendation to provide details.

① Has the applicant ever been found responsible for a disciplinary violation at your school, whether related to academic misconduct or behavioral misconduct, that resulted in the applicant's probation, suspension, removal, dismissal, or expulsion from your institution? ☐ Yes ☐ No

② To your knowledge, has the applicant ever been convicted of a misdemeanor, felony, or other crime? ☐ Yes ☐ No

If you answered yes to either or both questions, please attach a separate sheet of paper or use your written recommendation to give the approximate date of each incident and explain the circumstances.

☐ Check here if you would prefer to discuss this over the phone with each admission office.

I recommend this student: ☐ No basis ☐ With reservation ☐ Fairly strongly ☐ Strongly ☐ Enthusiastically

College Official's name (Mr./Ms./Dr., etc.) _____
Please print or type

 _____
Signature *Date*

Title _____ College or University _____

College or University address _____
City or Town *State/Province* *Country* *Zip/Postal Code*

College Official's phone (_____) _____ College Official's fax (_____) _____
Area Code *Number* *Ext.* *Area Code* *Number*

College or University CEEB/ACT code _____ College Official's e-mail _____