RECOMMENDATION FORM

This form maybe accomplished by any of the following: Principal, Assistant Principal, Prefect of Discipline, Guidance Counselor or Class Adviser.

Name of Applicant: ___________________________ Sex: ________

Last                      First                      MI

School: ___________________________ School Address: __________________

The above-mentioned student is applying for admission to Dominican School, you are kindly requested to make an evaluation of the student applicant.

During the year the applicant was with us, he belongs to the:

☐ Top 10%                     ☐ Top 21 to 75%

☐ Top 11-20%                  ☐ Low 25%

Please check one:

☐ Strongly Recommended       ☐ Recommended with Reservation

☐ Recommended                ☐ Not Recommended

Has the applicant been involved in any serious disciplinary case? If yes, please explain:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Number of year(s) the applicant has been in your school? ______

Please return this evaluation form in a sealed envelope, with your signature across the flap. Thank you.

Signature: ___________________________ Date: ___________________________

Name: ___________________________ Position: ___________________________

(Please Print) Tel. No.: ___________________________