

RECOMMENDATION FORM

Student's Name

Name and Title of person writing this recommendation

Date

To the applicant:

Please give this recommendation form to a co-worker, supervisor, or teacher with whom you work.

I hereby waive my right to review this recommendation: _____

Applicant's Signature

To the writer of this recommendation:

Thank you for your willingness to provide information to the South Hills School of Business & Technology Admissions Committee. Please fill out the form below. If possible, include a letter expanding on your evaluation of the applicant's potential. *If you have additional comments, you can write them on the back of this page.* Please mail the checklist directly to South Hills School at the following address:

South Hills School of Business & Technology
Admissions Department
480 Waupelani Drive
State College, PA 16801

Please evaluate the applicant on each of the following dimensions:

	Below Average	Average	Excellent Top 10%	Outstanding Top 2-3%	No basis for Judgment
Motivation					
Creative qualities					
Self-discipline					
Growth					
Leadership					
Self- confidence					
Personal Initiative					
Reactions to setbacks					

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

Evaluator's signature

Phone Number

Email address