

APPLICANT RECOMMENDATION

Please detach recommendation form and provide to a reference for completion.

to be completed by the student

Please type or print

Name: _____
Last First Middle Former name(s) on Academic Records

Mailing Address: _____
Street City State Zip

Social Security Number: _____ - _____ - _____ Intended semester of entry: _____

Unless requested, you will not be granted access to the completed recommendation.

Freshman Applicants: Ask a current academic instructor or your guidance counselor to complete this form.

Transfer Applicants: Ask a current or former academic instructor, advisor, employer, supervisor, or dean of students to complete this form.

Evaluator: We would appreciate your careful and candid evaluation of the above-named applicant for admission to Concordia University. Your appraisal is important in determining his or her probable success at Concordia. Your comments will not become part of any permanent record.

to be completed by the evaluator

Please rate the applicant in comparison to other students you have known who have been successful in college. Circle one.

	<i>No Basis</i>	<i>Poor</i>	<i>Below Average</i>	<i>Average</i>	<i>Above Average</i>	<i>Excellent</i>
	0	1	2	3	4	5
ACADEMIC RATING						
<i>Academic Achievement</i>	0	1	2	3	4	5
<i>Writing Skills</i>	0	1	2	3	4	5
<i>Speaking Skills</i>	0	1	2	3	4	5
<i>Listening Skills</i>	0	1	2	3	4	5
<i>Intellectual Potential</i>	0	1	2	3	4	5
<i>Disciplined Study Habits</i>	0	1	2	3	4	5
<i>Logical Reasoning</i>	0	1	2	3	4	5

CHARACTER & PERSONALITY

<i>Commitment to Career Goal</i>	0	1	2	3	4	5
<i>Self-confidence</i>	0	1	2	3	4	5
<i>Peer Relationships</i>	0	1	2	3	4	5
<i>Integrity</i>	0	1	2	3	4	5
<i>Concern for Others</i>	0	1	2	3	4	5
<i>Leadership</i>	0	1	2	3	4	5

APPLICANT INFORMATION

EVALUATION

1. In the space provided below or on letterhead, please evaluate this applicant's personal and academic qualifications. We are especially interested in your comments on personal ability, creative ability, work habits, and potential. We welcome any comments you feel would be relevant.

Signed: _____

Position: _____

Please print your name: _____

Date: ____ - ____ - ____

Phone number: (____) _____ - _____ Length of acquaintance with applicant: _____

In what context have you known the applicant?

Concordia University, finding prejudicial discrimination inconsistent with the spirit of free academic inquiry, does not discriminate in education on the basis of sex, race, color, religion, national origin, age, marital status, disability, or veteran status.

PLEASE RETURN THIS APPLICATION TO:

Concordia University

2811 NE Holman St
Portland OR 97211-6099

Admissions (503) 280-8501
Toll-free (800) 321-9371

admissions@cu-portland.edu
www.cu-portland.edu