



RECOMMENDATION FORM

To the Parent/Guardian: Please fill in Part I of this form and give to the teacher-adviser/principal of the school where your child has studied before applying to Silliman University School of Basic Education.

Part I.

Student's Name: _____ Date of Birth: _____

Student's Address: _____

Phone No.: _____ Cell No.: _____

Previous School Attended: _____

Address of School: _____

Phone No. of School: _____ Fax No.: _____

Part II.

To the Teacher-Adviser/Principal:

The student above is applying for admission to our school. Please complete this recommendation form. The data obtained will be useful in helping us evaluate his/her application for admission to our school. Rest assured all information will be treated with utmost confidentiality.

When completed, please give this to the student in a sealed envelope with your signature on the flap.

Thank you.

1. Observable Qualities of Student. Kindly **sign** (not check) the appropriate column.

	Excellent	Good	Average	Poor	No basis for rating (not observable)
1. Analytical/Quantitative Skills					
2. Overall Intellectual Ability					
3. Oral Communication					
4. Written Communication Skills					
5. Leadership Potential					
6. Maturity					
7. Ability to Relate with Others					
8. Emotional Stability					
9. Motivation/Initiative					
10. Self-confidence					
11. Sense of Responsibility					
12. Creativity					
13. Risk-taking/Daring					



2. Please assess the applicant by **signing** the appropriate line:

- | | | |
|---------------------|----------------------|------------------------------|
| a. Class Attendance | _____ never absent | _____ frequently absent |
| | _____ rarely absent | _____ always absent |
| b. Punctuality | _____ always on time | _____ frequently late |
| | _____ rarely late | _____ always late |
| c. Personal Conduct | _____ excellent | _____ fair |
| | _____ good | _____ needs improvement/poor |
| d. Study Habits | _____ excellent | _____ fair |
| | _____ good | _____ needs improvement/poor |

3. Has the student ever been involved in serious disciplinary cases (i.e. cheating, vandalism, stealing, drug abuse, etc.)? Please describe briefly.

4. Has the student obtained a passing grade in all his/her subjects during your time as an adviser?

() Yes () No

If not, in what subject/s did he/she fail? _____

I am recommending this student

() Strongly

() Fairly

() With Reservation

 Signature of Teacher-Adviser over Printed Name
 Date Released: _____

 Signature of Principal/Guidance Counselor
 over Printed Name