



Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught or advised. If you have no fair basis for judgment, do not hesitate to say so.

	ONE OF THE TOP FEW I HAVE EVER ENCOUNTERED	EXCELLENT (TOP 10% THIS YEAR)	GOOD (ABOVE AVERAGE)	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGMENT
Academic potential						
Academic achievement						
Intellectual curiosity						
Effort/Determination						
Ability to work independently						
Organization						
Creativity						
Willingness to take intellectual risks						
Concern for others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect accorded by faculty						
Respect accorded by peers						
Emotional stability						
Overall evaluation as a person						
Overall evaluation as a student						

If the student is relatively weak or strong in any areas listed above, please elaborate.

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

Please comment on this student's character, citizenship, and contributions to your community.

Please add any additional information that will give us a more complete picture of the student.

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the candidate's application. All information you provide will be held in confidence and disclosed only to the Admission Committee and others deemed necessary by the Director of Admission.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

TITLE \_\_\_\_\_

( ) TELEPHONE \_\_\_\_\_