



Transfer
Student
Recommendation

Instructor
Evaluation

APPLICANT
Please complete the top four lines of this form and give it to a teacher who has taught you in a traditional college level subject. We have enclosed an envelope that we suggest you place a stamp on and then give it to your instructor for the return of this information.

Name _____
last first middle initial

Permanent Address _____
number and street

_____ town/city county state zip

Phone (_____) _____
area code

Social Security # _____ / _____ / _____

INSTRUCTOR
The above student has applied for admission to Marietta College. Your comments regarding the applicant are important to us in evaluating his/her academic potential as a candidate for admission. Confidentiality: Your comments will be held in strictest confidence during the selection process and they will not become part of the applicant's file if he/she matriculates at Marietta College.

Name _____ Position _____
please type or print

College/University _____

Institution Address _____

Telephone Number _____ / _____ -- _____

BACKGROUND INFORMATION
How long have you known the applicant and in what context(s)? _____

What are the first words that come to your mind to describe the candidate? _____

Please list the course(s) in which you have taught the applicant, the year taught.

Course	Year
_____	_____
_____	_____
_____	_____

OFFICE OF ADMISSION
 MARIETTA, OHIO 45750-4005
 740-376-4600
 800-331-7896
 FAX 740-376-8888

(over please)

EVALUATION

Please write a candid evaluation of the applicant. We welcome all information that will help us gauge the academic potential of this candidate and differentiate him/her from others.

RATINGS

Please evaluate this candidate in comparison to other college-bound students you have taught using the following scale:

1 — Truly Outstanding 2 — Excellent (top 10%) 3 — Good (above average) 4 — Average 5 — Below Average

Genuine interest in learning	_____	Potential for growth	_____
Responsible completion of work	_____	Effective class participation	_____
Seriousness of purpose/ commitment to hard work	_____	Energy/motivation	_____
Time management	_____	Intellectual ability	_____
Written expression of ideas	_____	Creativity/originality	_____
Independence/initiative	_____	Other _____	

SIGNATURE _____ DATE _____

I recommend this student (optional)

enthusiastically strongly fairly strongly with reservation

You may call me for additional information _____

phone number

REMINDER: PLEASE RETURN AS SOON AS POSSIBLE, BUT NOT LATER THAN APRIL 15 FOR GENERAL ADMISSION OR MARCH 1 IF THE APPLICANT WISHES TO BE CONSIDERED FOR ACADEMIC SCHOLARSHIPS.