SMU

Teacher Recommendation

FOR THE STUDENT TO COMPLETE

Name_____
FIRST MIDDLE LAST SUFFIX (JR., III, ETC.)

Mailing Address_____
NUMBER AND STREET APT. #

_____
CITY STATE ZIP/POSTAL CODE COUNTRY

Home Phone Number (_____)_____ Social Security Number_____–_____–_____

Gender: ☐ Male ☐ Female Date of Birth_____ /_____ /_____
MONTH DAY YEAR

I recognize the confidential nature of this document and I ☐ do ☐ do not waive the right to access this information.

Student's Signature_____ **Date**_____

FOR THE TEACHER TO COMPLETE

Teacher's Name_____

School Name_____ Position/Subject_____

How long and in what capacity have you known the applicant?_____

_____

What are the first three words that come to your mind when describing this applicant?_____

_____

In making the following ratings, keep in mind that they will be used to compare this student to highly capable students. Please make your ratings as realistic as you can in comparison with other college-bound students by checking the **single** most appropriate box.

	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT	ONE OF THE TOP STUDENTS I HAVE ENCOUNTERED IN MY CAREER	NO BASIS FOR JUDGMENT
A. Academic promise	☐	☐	☐	☐	☐	☐
B. Independence	☐	☐	☐	☐	☐	☐
C. Leadership	☐	☐	☐	☐	☐	☐
D. Self-confidence	☐	☐	☐	☐	☐	☐
E. Academic performance	☐	☐	☐	☐	☐	☐
F. Perseverance/Follow-through	☐	☐	☐	☐	☐	☐
G. Maturity level	☐	☐	☐	☐	☐	☐
H. Communication skills	☐	☐	☐	☐	☐	☐
I. Summary evaluation	☐	☐	☐	☐	☐	☐

Please continue

The Office of Undergraduate Admission appreciates your comments regarding this applicant for undergraduate admission. Please use the space provided or attach an additional sheet for comments regarding this applicant's strengths and weaknesses as related to future academic and personal achievement.

Please mail this completed form along with any additional pages to:
SMU Undergraduate Admission
PO Box 750181
Dallas, TX 75275-0181

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