

TEACHER OR GUIDANCE COUNSELOR EVALUATION



TO THE APPLICANT

After completing all the relevant questions below, give this form to a teacher who has taught you an academic subject (for example: English, foreign language, math, science, or social studies) or to your guidance counselor.

Legal name

LAST/FAMILY

FIRST

MIDDLE

Birth date

MM/DD/YY

Social Security # (Optional)

Gender: Male Female

Address

STREET OR PO BOX

CITY

STATE/PROVINCE

COUNTRY

ZIP/POSTAL CODE

School you now attend

CEEB/ACT code

Important Privacy Notice

Under the terms of the Family Educational Rights and Privacy Act (FERPA), after you matriculate you will have access to this form and all other recommendations and supporting documents submitted by you and on your behalf if kept on file by Carroll College unless you waive your right to access. Please indicate below if you wish to waive your right to access this form and all other related supporting documents.

- Yes, I do waive my right to access, and I understand I will never see this form or any other recommendations submitted by me or on my behalf.
- No, I do not waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf if Carroll College saves them after I matriculate.

Signature

Date

TO THE TEACHER OR GUIDANCE COUNSELOR

Carroll College finds candid evaluations helpful when reviewing highly qualified applicants. This evaluation form, or another reference you may have prepared on behalf of this student, is acceptable.

Please sign below and return to: Carroll College Admission Office, 1601 North Benton Avenue, Helena, MT 59625.

Name

FIRST NAME

LAST/FAMILY NAME

Title

Subject taught (if applicable)

Signature

Date

Please print or type.

Secondary school

SCHOOL ADDRESS, NUMBER AND STREET

CITY

STATE/PROVINCE

COUNTRY

ZIP/POSTAL CODE

Phone ()

Ext.

E-mail address

BACKGROUND INFORMATION

How long have you known this student and in what context?

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

List the courses you have taught this student, noting for each the student's year in school (9th, 10th, 11th, 12th) and the level of course difficulty (AP, IB, accelerated, honors, elective).

Compared to other students in his or her class year, how do you rate this student in terms of:

	One of the top few I've encountered (top 1%)	Outstanding (top 5%)	Excellent (top 10%)	Very Good (well above average)	Good (above average)	Average	Below average	No basis for judgment
Academic achievement								
Intellectual promise								
Quality of writing								
Creative, original thought								
Productive class discussion								
Respect accorded by faculty								
Disciplined work habits								
Maturity								
Motivation								
Leadership								
Integrity								
Reaction to setbacks								
Concern for others								
Self-confidence								
Initiative, independence								
Overall								

EVALUATION

Please write whatever you believe is important about the applicant. We are particularly interested in the candidate's intellectual promise, motivation, integrity, leadership potential, special talents, and capacity for growth.
