

TO BE COMPLETED BY 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).

- How are you applying to Wesleyan? Early Decision (Binding) (by November 15)
 Regular Decision/Scholarship Priority (by January 15)
 Regular Decision (applications accepted until classes full)
 Transferring from another college

Legal name _____
Last (Enter name exactly as it appears on official documents.) First Middle (complete)

Birth date _____ Social Security # _____
mm/dd/yyyy (Optional)

Address _____
Number & Street Apartment # City/Town 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 unless you waive your right to access.

- 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 to the institution at which I'm enrolling.

Signature _____ Date _____

I authorize all secondary schools and/or colleges and universities I've attended to release all requested records and authorize review of my application for the admission process indicated on this form.

Signature _____ Date _____

TO BE COMPLETED BY THE TEACHER/PROFESSOR

Use this form to describe your student. If you need more space, feel free to attach additional information. The materials submitted in this report are subject to the provisions of the Family Educational Rights and Privacy Act (FERPA). Your recommendation will be used only for admission purposes and will not become part of the student's permanent record. Return this form prior to the deadline indicated above to: Office of Admission, Wesleyan College, 4760 Forsyth Road, Macon, Georgia 31210-4462, Fax: 478-757-4030. Thank you for your time and effort.

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 (10th, 11th, 12th; first-year, sophomore; etc.) and the level of course difficulty (AP, IB, accelerated, honors, elective; 100-level, 200-level, etc.). _____

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

No basis		Below average	Average	Good (above average)	Very good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	Top few (top 1%)
	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 think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)

Teacher/Professor's name (Mr./Ms./Dr., etc.) _____ Subject taught _____
Please print or type

Signature _____ Date _____
mm/dd/yyyy

School/College _____
 School address _____
Number & Street City/State Country ZIP/Postal Code

Teacher's phone (_____) _____ Teacher's e-mail _____
Area Code Number Ext.