

**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). **If applying via mail**, please also give that teacher stamped envelopes addressed to each institution that requires a Teacher Evaluation.

Legal name \_\_\_\_\_  Female  
 Male  
Last/Family/Sur (Enter name **exactly** as it appears on official documents.)      First/Given      Middle (complete)      Jr., etc.

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 after matriculating, unless at least one of the following is true:

1. The institution does not save recommendations post-matriculation (*see list at [www.commonapp.org/FERPA](http://www.commonapp.org/FERPA)*).
2. You waive your right to access below, regardless of the institution to which it is sent:

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, if that institution saves them after I matriculate.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**TO THE TEACHER**

The Common Application membership finds candid evaluations helpful in choosing from among highly qualified candidates. You are encouraged to keep this form in your private files for use should the student need additional recommendations. Please submit your references promptly, **and remember to sign below**.

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

Signature \_\_\_\_\_ Date \_\_\_\_\_  
mm/dd/yyyy

Secondary school \_\_\_\_\_

School address \_\_\_\_\_  
Number & Street      City/Town      State/Province      Country      ZIP/Postal Code

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

**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 his or 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%)	One of the top few I've encountered (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.)