High School Recommendation Form

Name of Applicant: ________________________________

Address ________________________________ City __________________ State ______

I have applied to Montreat College and request that this recommendation be completed and a transcript of my high school work be sent to Montreat College.

Applicant Signature __________________________ Date ______________

To be completed by the Guidance Counselor:

Your responses will be treated in a strictly professional manner. This information will be used only in assisting in the admissions decision. Since this information will not be a part of the student’s permanent file, it will not be affected by the Family Education Rights and Privacy Act of 1974 that gives the student access to the information on request.

1. In your estimation, will the applicant be successful academically?
   - Yes
   - Probably
   - No

2. In your estimation, will the applicant be successful socially?
   - Yes
   - No

3. Does the applicant have any disabilities that Montreat College officials should know about in order to provide assistance following enrollment? 
   - Yes
   - No
   If yes, please explain: __________________________________________________________

4. Do you know any reason to question the applicant’s honesty or integrity? 
   - Yes
   - No
   If yes, please explain: __________________________________________________________

5. Applicant’s rank in class: Based on _____ semester _____ quarters
   - Ranked _____ in a class of _____
   - Applicant’s GPA ______ Exactly _____ Approximately _____

6. Please provide the lowest numerical equivalent of the following grades: A ___ B ___ C ___ D ___

7. Would you recommend that the applicant be admitted to Montreat College?
   - Recommend
   - Recommend with reservation
   - Do not recommend

Other comments: ________________________________________________________________

__________________________________________________________ Date ______________
Signature

Name (please print) __________________________ Institution ____________________________
Institution Address ________________________________________________________________

Please return this form to the Office of Admissions with an official transcript. Thank you.