



# DON BOSCO COLLEGE

Canlubang, Calamba City, 4028

Telefax No. (049) 549-2307

Mobile No. 0917-524-7141

## LETTER OF RECOMMENDATION

### TO THE APPLICANT:

Fill in your name below and then give this form to your class adviser for the other necessary details.

Print: LAST NAME FIRST NAME MIDDLE NAME

is applying for admission to Don Bosco College for the academic school year \_\_\_\_\_.

### TO THE PERSON RECOMMENDING:

*Please fill out this form completely in order to help us assess the application of the student. All responses shall be kept confidential. After accomplishing the form, please seal it in a letter envelope and sign on the flap of the envelope before returning it to the applicant.*

**Note:** You may seek the help of other school personnel (e.g., guidance counselor) in completing this form.

#### A. What can you say about the student in terms of his/her:

|  | Low<br>1 | 2 | 3 | High<br>4 |
|--|----------|---|---|-----------|
| Classroom participation and cooperation/Rapport with teachers                  |          |   |   |           |
| Leadership in classroom and extra-curricular activities                        |          |   |   |           |
| Positive attitude toward work in the classroom and Extra-curricular activities |          |   |   |           |
| Punctuality / Attendance   |          |   |   |           |
| Sociability with peers   |          |   |   |           |

#### Psychological Tests taken:

Raw Score

%rank

Comments

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**B. Has he/she been subjected to any disciplinary action?**

Yes     No

If yes, please indicate the nature of the offense and the action taken by the authorities concerned

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**C. How would you rank him/her in terms of academic performance?**

*Student's Academic Performance in his/her section:*

Top 10%     25%     50%     below 50%

Number of students in class/section = \_\_\_\_\_

*Student's Academic Performance in Graduating class:*

Top 10%     25%     50%     below 50%

Number of graduating students = \_\_\_\_\_

**D. RECOMMENDATION:**

- I strongly recommend him/her for admission.
  - I recommend him/her for admission.
  - I recommend him/her admission with some reservations.
  - I do not recommend him/her for admission.
  - Other comments: \_\_\_\_\_
- 

Name (Print): \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Institution: \_\_\_\_\_

Tel. No.: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile No.: \_\_\_\_\_

Noted by:

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Principal / Dean  
(Signature over printed name)

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Guidance Counselor