



LINK UNLIMITED SCHOLARS RECOMMENDATION FORM # 3 (GUIDANCE COUNSELOR, PRINCIPAL, OR OTHER SCHOOL ADMINISTRATOR)

The student named below is an applicant for LINK Unlimited Scholars, an educational college preparatory program for economically disadvantaged African-American youth. This student is required to obtain a recommendation from individuals who have some background knowledge of him/her, specifically, any *personal insights into the student, his/her family, and contributions made to your school environment*.

Thank you very much for your time and cooperation in filling out this form. The information you provide will greatly assist our selection process.

This form must be returned with the student's completed application. If you would like the recommendation to be submitted in confidence, please present it to the student in a sealed envelope. If you need additional space to write, feel free to attach an additional page(s).

SECTION I — To be completed by the applicant.

Name of Applicant _____

SECTION II — To be completed by the recommender.

1. In what capacity and how long have you known the applicant?

2. Number of Students in the Applicant's grade: _____

3. If your school computes rank, please note the student's placement in class. **If not, please estimate rank if rank is not available.**

The applicant ranks _____ out of _____

4. Has the student been regular in attendance? Yes No If no, please explain:

5. Is there a problem with tardiness? Yes No If yes, please explain:

6. Has the student had any recurrent and/or serious disciplinary problems? Yes No If yes, please explain?

7. What are the first three words that come to mind when describing this student?

8. What contributions has the applicant made as a citizen to your school community?

9. Please comment on the applicant's relationship with peers, cooperation with members of the staff/faculty, and personal traits (enthusiasm, concern for others, responsibility, and integrity):

10. Are you aware of any personal, physical, emotional, or learning difficulties (i.e. Individual Learning Plan) that have caused the student's performance to be lower than expected? If so, please explain.

11. Parents are an important part of our relationship with a student (and an integral part of the LINK Unlimited Scholars partnership). To the best of your knowledge, please share with us any thoughts you have regarding the applicant's family, including their involvement in your school.

8. In terms of his/her potential to succeed in the LINK Unlimited Scholars program, how would you rank the applicant? (check one)

Top 5%

Top 10%

Top 25%

Top 50%

Bottom 50%

Name Title or Position

Signature Date

Institution

Telephone Fax E-mail

*Please return completed evaluation to the applicant listed on the previous page.
Do not send this form directly to LINK Unlimited. This form must be returned with the student's completed application. If you would like the recommendation to be submitted in confidence, please present it to the student in a sealed envelope.*