ST. FRANCIS DE SALES SEMINARY, HIGH SCHOOL UNIT
San Lorenzo Ruiz Road, 4217 Lipa City, Batangas
Tel. No.: (043) 756-4190 E-mail Add: sfsminor@yahoo.com.ph

RECOMMENDATION FORM

To the Applicant:

Please complete this section and submit the form to your Principal. You should include an envelope addressed to: *Office of the Registrar, St. Francis de Sales Seminary, High School Unit, San Lorenzo Ruiz Road, Lipa City 4217.* This recommendation form can be hand carried personally together with your other requirements.

Name _____ Grade / Level _____
Last First Middle

Home Address _____

_____Tel. No._____

School _____ Address_____

Tel. No. _____

TO THE SCHOOL PRINCIPAL:

The student whose name appears above is applying for admission to St. Francis de Sales Minor Seminary. Your evaluation of his academic performance will help our Committee in making final selections for admission. After accomplishing this form, please place in an envelope, seal and sign across the flap of the envelope and return to the applicant. Unsealed and unsigned recommendations will not be accepted. Thank you for your cooperation.

A. How long have you known the applicant? _____

This applicant's scholastic average is _____ as of _____.
month/year

He ranks ☐ exactly ☐ approximately ___ in a class of ___. How many other students are in this rank? _____

If precise rank is not available, please indicate approximate rank to the nearest tenth. _____

Has the applicant been subjected to any disciplinary action?
Misconduct? ☐ yes ☐ no Academic Problem? ☐ yes ☐ no

If yes, please explain _____
_____

B. How would you rate the student using the scale below?

	Extraordinary	Excellent	Good	Average	Below Average	N/A
Creativity	☐	☐	☐	☐	☐	☐
Consistency	☐	☐	☐	☐	☐	☐
Self-discipline	☐	☐	☐	☐	☐	☐
Growth potential	☐	☐	☐	☐	☐	☐
Academic potential	☐	☐	☐	☐	☐	☐
Leadership ability	☐	☐	☐	☐	☐	☐
Motivation	☐	☐	☐	☐	☐	☐
Responsibility	☐	☐	☐	☐	☐	☐
Work/study habits	☐	☐	☐	☐	☐	☐
Independence	☐	☐	☐	☐	☐	☐
Teamwork Skills	☐	☐	☐	☐	☐	☐
Dependability	☐	☐	☐	☐	☐	☐

C. Comments – Please do not leave this blank. Your honest evaluation of the applicant will help the Committee decide on his application.

_____
_____
_____
_____

D. YOUR RECOMMENDATION *The applicant is:*

	Not Recommended	Recommended with Reservation	Recommended	Strongly Recommended
For academic promise:	☐	☐	☐	☐
For character and personal promise:	☐	☐	☐	☐
Overall:	☐	☐	☐	☐

Name (please print) _____Position _____

Signature _____Date _____