



# NOTRE DAME HIGH SCHOOL

CONFIDENTIAL  
RECOMMENDATION FORM  
Due by January 24, 2012

**To the Student:** Please type or print your name and give this form to your current Principal or Counselor with a stamped envelope addressed to the Director of Admissions.

Student Name: \_\_\_\_\_

Current School: \_\_\_\_\_

**To the Principal/Counselor:** This report will be held in strictest confidence. Schools may submit a copy of the Confidential Recommendation Form provided by the Archdiocese of San Francisco in place of this form.

## Academic Qualities

	Excellent	Good	Average	Below Average
Study Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work Cooperatively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention Span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This student is capable of succeeding in a college preparatory curriculum. Yes  No

## Personal Qualities

	Excellent	Good	Average	Below Average
Personal Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation in School Community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect for Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect Accorded by Her Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Family Information (This information will not be used when evaluating the student.)

	Excellent	Good	Average	Below Average
Commitment to Catholic education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support for School Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meets Financial Obligations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is the family receiving financial aid? Yes  No  N/A

- 1. Please use the space below to state your supporting reasons on any of the academic and personal qualities marked on the previous page.
  
- 2. Should the Admissions Committee be aware of any factors that have had an impact on this student's academic or social progress to date?
  
- 3. Has this student ever been placed in any special school programs (e.g., Gifted Student, Accelerated Classes, ESL, LEP, Tutorial or Resource/Learning Specialist, etc.) or received any special learning accommodations (e.g., extended time, untimed or oral testing, enlarged print, books on tape, adjusted assignments, etc.)?
  
- 4. Please comment on this student's disciplinary and attendance record at your school.

**Overall Recommendation**

- I strongly recommend this applicant.
- I recommend this applicant.
- I recommend this applicant with reservations.
- I do not recommend this applicant.

5. Is there additional information regarding this student that could be conveyed more effectively in a telephone conversation?

Yes  No

Please call the school regarding this applicant and ask for: \_\_\_\_\_

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

Print Name: \_\_\_\_\_ Position: \_\_\_\_\_

School: \_\_\_\_\_ Phone: \_\_\_\_\_

**This report will not be disclosed to the applicant. It will be available only to those involved in our admission decision process.**