



## Recommendation Form

### College Admissions Office

Br. Andrew Gonzalez Hall, De La Salle University, 2401 Taft Avenue, Manila 1004  
 Telephone Nos. 5234230 (Direct); 5244611 loc 166 and 167  
 Email: college.admissions@dlsu.edu.ph  
 Website: www.dlsu.edu.ph/admissions/cad

NAME OF APPLICANT \_\_\_\_\_ GENDER \_\_\_\_\_  
LAST FIRST MI

SCHOOL \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

The person named above is applying for admission at De La Salle University. You have been asked for a recommendation. In making the following ratings, please keep in mind that they will be used to compare this student with other applicants.

	NOT RECOMMENDED	RECOMMENDED WITH RESERVATION	RECOMMENDED	STRONGLY RECOMMENDED
FOR ACADEMIC POTENTIAL	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
FOR CHARACTER AND ATTITUDE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
OVERALL RECOMMENDATION	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please check one: In the entire graduating class, the applicant belongs to the

- LOWER 25%     
  MIDDLE 50%     
  UPPER 25%     
  TOP TEN

POSITIVE REMARKS:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NEGATIVE REMARKS:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NAME (PLEASE PRINT) \_\_\_\_\_ POSITION \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Length of time acquainted with the applicant: \_\_\_\_\_

Please return this appraisal to the applicant in a sealed envelope, with your signature across the seal. The applicant will then submit the sealed envelope to the College Admissions Office, De La Salle University.

Thank you very much.