

NORTHLAND COLLEGE

Recommendation Form

Please ask your secondary school teacher or guidance counselor for their assistance in completing this form. Be sure to allow ample time for the completion and mailing of all application materials.

FOR THE APPLICANT:

First Name	Middle Name	Last Name
Date of Birth	Social Security Number	Male / Female

HOME / PERMANENT ADDRESS

Street	City	State	Postal Code	Country
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SCHOOL

Official Name	City	State
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CURRENT YEAR COURSES (Please be sure to indicate whether a course is advance placement, honors or international baccalaureate):

Term One	Term Two	Term Three	Term Four

What type of academic year does your school use? (Check all that apply) Semesters Trimesters Quarters Block

Applicant's Signature	Date
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For the Guidance Counselor/Teacher

The following information is to be completed by a secondary school teacher or guidance counselor. Please use this form to describe the aforementioned applicant for admission and scholarship for Northland College. Please feel free to provide additional information or include a letter of recommendation. An official copy of the applicants transcript should be included with this form.

Date of applicant's (anticipated) high school graduation: _____ Applicant's GPA: _____ / 4.0

Applicant's composite test score:

	English	Math	Science Reasoning	Reading	Composite	Date Taken
ACT						

	Critical Reading	Math	Composite	Date Taken
SAT				

Class rank of applicant: _____ out of a class of _____ <input type="checkbox"/> We do not rank
Does more than one student have this rank? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, how many? _____
What dates does this rank cover? _____
This rank is <input type="checkbox"/> Weighted <input type="checkbox"/> Not Weighted

List numerical value for each letter grade	
A	
B	
C	
D	
F	
Other: _____	

Name	Title	Email
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Signature	Date	Phone Number
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Name of School	School Address	Fax
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CEEB/ACT code: _____

NORTHLAND COLLEGE

For the Evaluator

(Applicant: please have a secondary counselor, teacher, or an individual who is familiar with you academically fill out this section of the recommendation form.)

Name of evaluator _____

Relationship to applicant: Counselor Teacher Other: _____

Please compare the applicant to other students in his/her secondary school class who are also college bound.

	Excellent	Above average	Average	Below Average
Academic Preparedness				
Academic Motivation				
Personal Character				
Creativity				
Extracurricular				
Leadership				
Accomplishments				
Maturity				
Respect for others				

Please write an evaluation of the student that you feel would be helpful to the admission committee.

How long have you known the applicant and in what capacity? _____

Please list three qualities that describe the applicant.

1. _____
2. _____
3. _____

How do you recommend this student? Fully Strongly Fairly strongly With reservation

Title

Signature

Date

Please return completed forms to:
Northland College
1411 Ellis Avenue
Ashland, WI 54806-3999