

TO THE STUDENT: Fill in the information about yourself and your school requested below, detach this form, and give it to a teacher who has taught you an academic subject. Please provide the teacher with a stamped envelope addressed to the Office of Admissions, Moravian College, 1200 Main Street, Bethlehem, PA 18018.

STUDENT'S NAME _____
Last First Middle

Address _____
Street City

County State/Province Zip/Postal code

Official name of secondary school _____

Address _____
Street City

County State/Province Zip/Postal code

TO THE TEACHER: This student has applied for admission to Moravian College. Please provide the factual information requested. In addition, please evaluate the student as carefully and honestly as possible to help us get to know the candidate and make an appropriate decision concerning admission. This recommendation form should be returned as soon as possible.

You may use the spaces on this form to provide any alternative or additional information that might help us. If you prefer, you may present your information in another way instead, such as a letter or a photocopy of another report. If you do, please attach all materials to this recommendation form.

The information you provide will not become a part of the student's permanent record. It will be seen only by those members of the College administration and faculty involved in the admission process.

If you have questions about this recommendation form, about Moravian College, or about our admission standards and requirements, please contact the Office of Admissions at 1200 Main Street, Bethlehem, PA 18018, or call 800 441-3191 or 610 861-1320.

How long have you known the student? _____

What subject(s) have you taught the student? _____

Please complete other side.

How does this student compare with others in his or her class? (Check the single most appropriate answer.)

Academic ability: Outstanding Excellent Good (above average) Average Below average

Personal qualities: Outstanding Excellent Good (above average) Average Below average

Please expand on the above by describing the student’s academic and personal strengths and weaknesses, as you are aware of them. You may also note the student’s special interests or talents, explain unusual circumstances, or present any other back-ground information that would help us get to know the applicant. You may either use the space below or attach a separate sheet to this form.

Signature _____ Date _____

Name (please type or print) _____

School _____ Phone _____

City _____ State/Province _____ Zip/Postal code _____

E-mail _____