

Teacher Reference Form

Name of Candidate	Last		First	Middle	
Candidate's Address			FIISL	Mildule	
	Number and Street				
City		Postal Code		Country	
School					

Applicant Instructions

Please fill in the above information and give this form, with a stamped envelope to a teacher or professor and ask that it be completed and sent as soon as possible to the Office of International Recruitment and Admission, University of Mount Union, 1972 Clark Ave. Alliance, OH 44601, U.S.A.

Teacher Instructions

The student named above is applying for admission to the University of Mount Union. The Admission Committee finds candid evaluations helpful in choosing from among highly qualified candidates. We are primarily interested in whatever you think is important about the applicant's academic and personal qualifications for college. The personal information requested below will supplement the student's test results and academic record. If you prefer to write a personal letter or explain in further detail the evaluation you have made, please use the back of this form.

Materials submitted in support of application for admission to the University of Mount Union are used only by those members of the Admission Committee charged with responsibility of admission decisions. Each person given access to the materials is instructed to maintain strict confidentiality. Mount Union does not provide access to admission records to applicants who are denied, or those students who decline an offer of admission. In accordance with the Family Educational Rights and Privacy Act of 1974, however, matriculating students do have access to their permanent files which may include forms such as this one. Since we value your comments highly, we ask that you complete the form in the knowledge that it may be retained in the student's file, should the candidate matriculate at the University of Mount Union.

Please submit your reference promptly. We are grateful for your assistance.

Academic Skills and Potential Ratings

 $Compared \ to \ other \ students, \ check \ how \ you \ would \ rate \ the \ applicant.$

	Excellent	Good	Average	Below Average	Unknown
Intellectual Ability					
Academic Motivation and Potential for Growth					
Independence and Initiative					
Cooperation					
Leadership					
Character					
Emotional Maturity					





Background Information

How long have you known the applicant?	
What is your relationship to the applicant?	
Name (please print)	
Title	
School	
Signature	Date

Please return the completed form directly to:
Office of International Recruitment and Admission, University of Mount Union
1972 Clark Ave., Alliance, OH 44601-3993, U.S.A.