College of the Holy Cross

Teacher Evaluation

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Stud	lent is a	-candic	late tor

Check One

- O Early Decision (December 15)
- O Regular Decision (January 15)

	Type or print				
Student Information	Last name	First name	Middle name	Social Security Number	
	Street address		City	State Zip	
High School Information	Official name of high school		City	State Zip	
	Telephone				
Summary	promise as a Holy Cross s	ppraisal of the candidate, assess student. Please return by Decen ne Admissions Office, College o	nber 15TH for Early Deci	sion and January 15тн	
	Signature		Faculty department		
	Please print name		Date		
	Title(s) of course(s) taught to st	udent			