

TO THE APPLICANT

After completing all the relevant questions below, give this form to your secondary school counselor or another school administrator.

Legal name _____
LAST/FAMILY (ENTER NAME EXACTLY AS IT APPEARS ON OFFICIAL DOCUMENTS.) FIRST/GIVEN MIDDLE (COMPLETE)

Birth date _____ Social Security # _____
MM/DD/YYYY (OPTIONAL)

Address _____
NUMBER & STREET APARTMENT # CITY/TOWN STATE/PROVINCE COUNTRY ZIP/POSTAL CODE

School you now attend _____

Current year courses—please indicate title, level (AP, IB, advanced honors, etc.) and credit value of all courses you are taking this year. Indicate quarter classes taken in the same semester on the appropriate semester line.

FIRST SEMESTER/TRIMESTER	SECOND SEMESTER/TRIMESTER	THIRD TRIMESTER
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IMPORTANT PRIVACY NOTICE: Under the terms of the Family Educational Rights and Privacy Act (FERPA), after you matriculate you will have access to this form and all other recommendations and supporting documents submitted by you and on your behalf after matriculating, unless at least one of the following is true:

- The institution does not save recommendations post-matriculation
- You waive your right to access below, regardless of the institution to which it is sent:
 - Yes, I do waive my right to access, and I understand I will never see this form or any other recommendations submitted by me or on my behalf.
 - No, I do *not* waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling, if that institution saves them after I matriculate.

Signature _____ Date _____

TO THE SECONDARY SCHOOL COUNSELOR

Attach applicant's official transcript, including courses in progress, a school profile, and transcript legend. (Check transcript copies for readability.) Use additional section on back to complete your evaluation for this student. Be sure to sign below. Please mail this form to: Office of Admission; 122 Le Mans Hall, Notre Dame, IN 46556

Counselor's name _____
PLEASE PRINT OR TYPE

Signature _____ Date _____
MM/DD/YYYY

Title _____ School _____

School address _____
CITY/TOWN STATE/PROVINCE COUNTRY ZIP/POSTAL CODE

Counselor's phone (_____) _____ Counselor's fax (_____) _____
AREA CODE NUMBER AREA CODE NUMBER

Secondary school CEEB/ACT code _____ Counselor's e-mail _____

BACKGROUND INFORMATION

Class rank: _____ Class size: _____ Covering a period from _____ to _____
(MM/YYYY) (MM/YYYY)

The rank is weighted unweighted. We do not rank.

How many students share this rank? _____

Cumulative GPA: _____ on a _____ scale, covering a period from _____ to _____
(MM/YYYY) (MM/YYYY) (MM/YYYY) (MM/YYYY)

This GPA is weighted unweighted. The school's passing mark is _____

Highest GPA in class _____ Graduation date _____
(MM/YYYY)

Percentage of graduating class immediately attending: _____ four-year _____ two-year institutions

How long have you known this student and in what context? _____

What are the first words that come to your mind to describe this student? _____

Are classes taken on a block schedule?
 Yes No

Is the applicant an IB Diploma candidate?
 Yes No

If you offer AP courses, do you limit the number a student can take?
 Yes No

In comparison with other college preparatory students at your school, the applicant's course selection is:
 most demanding
 very demanding
 demanding
 average
 below average

RATINGS

Compared to other students in her class year, how do you rate this student in terms of:

	No basis	Below average	Average	Good (above average)	Very good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	One of the top few I've encountered (top 1%)
Academic Achievement								
Extracurricular accomplishments								
Personal qualities and character								
OVERALL								

EVALUATION

Please write whatever you think is important about this student, including a description of academic, extracurricular, and personal characteristics. We welcome a broad-based assessment that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)

Check here if you would prefer to discuss this applicant over the phone with a representative of the Office of Admission.

I recommend this student: No basis With reservation Fairly strongly Strongly Enthusiastically