



# Susquehanna University

514 University Avenue  
Selinsgrove, Pennsylvania 17870-1040

## TEACHER EVALUATION

**TO THE APPLICANT:** Fill in the information below and give this form and a stamped envelope addressed to Susquehanna University to a teacher who has taught you an academic subject in your junior or senior year.

Social Security No.: \_\_\_\_\_  
(Optional)

Student name: \_\_\_\_\_  
Last/Family First Middle (complete) Jr., etc.

Address: \_\_\_\_\_  
Number and Street City or Town State Country Zip Code + 4 or Postal Code

School you now attend: \_\_\_\_\_ CEEB/ACT code: \_\_\_\_\_

### TO THE TEACHER:

The Admissions Office 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. Please submit your references promptly. A photocopy of this reference form, or another reference you may have prepared on behalf of this student is acceptable. You are encouraged to keep the original of this form in your private files for use should the student need additional recommendations. We are grateful for your assistance.

### CONFIDENTIALITY:

We value your comments highly and ask that you complete this form in the knowledge that it may be retained in the student's file should the applicant matriculate at Susquehanna University. In accordance with the Family Educational Rights and Privacy Act of 1974, matriculating students do have access to their permanent files which may include forms such as this one. Colleges do not provide access to admissions records to applicants, those students who are denied admission, or those students who decline an offer of admission. Again, your comments are important to us and we thank you for your cooperation. Susquehanna University is committed to administer all educational policies and activities without discrimination on the basis of race, color, religion, national or ethnic origin, age, handicap, or sex. The admissions process at private undergraduate institutions is exempt from the federal regulation implementing Title IX of the Education Amendments of 1972.

Please return this sheet to the Admissions Office in the envelope(s) provided to you by this student.

Teacher's name (please print or type): \_\_\_\_\_ Position: \_\_\_\_\_

Secondary school: \_\_\_\_\_

School address: \_\_\_\_\_

Teacher's phone: (\_\_\_\_\_) \_\_\_\_\_ Teacher's e-mail: \_\_\_\_\_  
Area Code Number Ext.

### BACKGROUND INFORMATION:

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? \_\_\_\_\_

List the courses you have taught this student, noting for each the student's year in school (10th, 11th, 12th) and the level of course difficulty (AP, accelerated, honors, I.B., elective, etc.).

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EVALUATION

Please feel free to write whatever you think is important about this student, including a description of academic and personal characteristics. We are particularly interested in the candidate's intellectual promise, motivation, relative maturity, integrity, independence, originality, initiative, leadership potential, capacity for growth, special talents, and enthusiasm. We welcome information that will help us to differentiate this student from others.

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RATINGS

Compared to other students in his or her entire secondary school class, 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%)	One of the top few encountered in my career
	Creative, original thought						
	Motivation						
	Self-confidence						
	Independence, initiative						
	Intellectual ability						
	Academic achievement						
	Written expression of ideas						
	Effective class discussion						
	Disciplined work habits						
	Potential for growth						

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Signature \_\_\_\_\_ Date \_\_\_\_\_

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