

# OHIO NORTHERN UNIVERSITY

## HIGH SCHOOL TEACHER/COUNSELOR RECOMMENDATION FORM

Required for First-Time Freshmen Only

### TO BE COMPLETED BY APPLICANT

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

### RELEASE OF ACCESS TO THIS RECOMMENDATION FORM

The applicant must complete and sign either of the following statements BEFORE submitting this form to the reference. This request is in compliance with Federal law P.L. 93-380 (Family Educational Rights and Privacy Act of 1974).

I hereby voluntarily waive and relinquish any right of access to this confidential letter of evaluation.

I retain my right of access to this confidential letter of evaluation.

Date \_\_\_\_\_ Signed \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

### TO BE COMPLETED BY REFERENCE

	Superior 5	Excellent 4	Good 3	Average 2	Below Average 1	Not Observed
<b>Oral Communication:</b> speaks clearly with precision and accuracy, without ambiguity.						
<b>Written Communication:</b> writing is precise, accurate, grammatically correct and unambiguous.						
<b>Intellectual Ability:</b> academic competence and aptitude for undergraduate programs.						
<b>Leadership:</b> takes initiative, motivates others and leads productive class discussion.						
<b>Ethics:</b> displays honesty, integrity and ethical behaviors.						
<b>Empathy:</b> considerate, sensitive, tactful in response to others and shows concern for others.						
<b>Reliability:</b> dependable, responsible, prompt, thorough and disciplined.						
<b>Judgment:</b> displays critical thinking skills, common sense, decisiveness, maturity and integrity.						
<b>Interpersonal Relations:</b> able to get along well with peers and superiors.						
<b>Adaptability:</b> reacts well to stress, is poised, controlled and self confident.						
<b>Professional Appearance:</b> maintains good personal hygiene, appropriate attire, well-groomed.						

Please provide additional information about this student, including a description of academic and personal characteristics, as demonstrated in your interactions with the student. Information that will help us to differentiate this student from others will be helpful. Feel free to attach an additional sheet if you need more room.

---



---



---



---

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

Reference Name \_\_\_\_\_

Relation to Applicant \_\_\_\_\_

Number of years you have known applicant:  <1     1-2     >2

Mail this form to: Office of Admissions, 525 South Main Street, Ada, Ohio 45810