To The Student

Name  ______________________________________________________________________________________________________

Last (family/legal name)  First (given name)  Middle  Former last name if any

Preferred Name  ______________________________________________________________________________________________

Phone (        ) _______________________________________________________ E-mail __________________________________

Applying as a:  □ Freshman from _________________________________________________High School

□ Transfer from ___________________________________________________College/University

Please read the statement below.
I waive the opportunity to review the information contained on this form:  □ Yes  □ No

Signature  ________________________________________________________  Date ____________________________________

The reference is an important part of your application to NDNU. Please give this form (well in advance) to a teacher, counselor, or school administrator who knows you well. Please be considerate and provide your reference with a stamped envelope addressed to the Office of Admissions, Notre Dame de Namur University, 1500 Ralston Avenue, Belmont, CA 94002-1908.

To The Reference

Thank you for taking part in such an important process. The Admissions Committee at NDNU appreciates your valuable input into our decision making. Please provide us with your honest assessment of this candidate’s ability in the categories listed below.

How would you rate the candidate compared to other students at your school for:

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<thead>
<tr>
<th>Written Expression</th>
<th>Exceptional</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>No Basis for Assessment</th>
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<tbody>
<tr>
<td>Oral Expression</td>
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<td>Critical Thinking</td>
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<td>Intellectual Curiosity</td>
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<td>Creativity</td>
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<td>Social Maturity</td>
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<td>Character</td>
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<td>Commitment to Helping Others</td>
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</table>
I offer the following recommendation for this candidate for admission to NDNU:

☐ Enthusiastically recommend  ☐ Recommend  ☐ Recommend with reservations  ☐ Not recommend

This recommendation is based upon my experience with this candidate in the following classes/activities: ____________________________

____________________________________________________________________________________________________________

Please feel free to provide additional information in an attached letter.

This student’s test scores (if known): SAT Verbal _____  SAT Math _____  ACT _____

This student’s class rank: _____/in a class of _____  ☐ Our school does not rank.

I am familiar with NDNU’s admission standards and programs: ☐ yes  ☐ no

Name_______________________________________________________________________________________________________

Last name                  First name                  Middle name

Signature ___________________________ Date __________________________

Title ___________________________ School/College __________________________

Address _____________________________________________________________________________________________________

Number and street ___________________________ City __________________________

State ___________________________ Zip __________________________

Country ___________________________ Phone (____) ___________________________ E-mail ____________________________

Please return this form directly to Office of Admissions, Notre Dame de Namur University, 1500 Ralston Avenue, Belmont, CA 94002-1908.

We welcome your comments.

Area for more comments if needed:

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