

Undergraduate Letter of Reference

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:

	Exceptional	Above Average	Average	Below Average	No Basis for Assessment
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commitment to Helping Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

