

Counselor Recommendation Form



To the applicant: Please ask your guidance counselor or advisor to complete this form.

Student: _____
Last First Middle

How long have you known the applicant and what courses has he/she taken with you?

Please briefly state your assessment of this student's academic strength, achievement and promise. Comment on his/her classroom performance, motivation, initiative and desire to succeed.

- ☐ I strongly recommend the admission of this applicant to Fontbonne University.
- ☐ I recommend this applicant.
- ☐ I recommend this applicant with reservations.
- ☐ I do not recommend this applicant for admission to Fontbonne University.

(Please make any additional comments you feel would be helpful in assessing this applicant's case.)

Name (please print) _____ Signature _____

_____ School Address

_____ Position Date Telephone

This applicant ranks _____ in a class of _____ students and has a cumulative grade point average of _____ on a _____ scale.

This rank is: ☐ weighted ☐ unweighted This grade point average is: ☐ weighted ☐ unweighted

This school DOES NOT rank its students. Because exact rank is not available, I would place this student in the _____ percentile.

To the faculty: Federal legislation stipulates that this information will be open for review upon the student's request, provided admission to the University is granted; otherwise, it is confidential.

Please attach an official copy of this student's transcript and test scores and mail to:
Office of Admission, Fontbonne University, 6800 Wydown Boulevard, St. Louis, MO 63105