Extracurricular Recommendation Form

To be completed by the applicant’s designated recommender and emailed or mailed directly to Saint Mary’s Hall.

Candidate’s Full Name: ____________________________________________________________ Applying for Grade: _______
  First  Middle  Last

To the Parent/Guardian: Please read and sign the following statement before giving this form to your child’s teacher.

I understand and agree that the information contained in this form will be used only in the selection of candidates for admission to Saint Mary’s Hall and will not become part of the applicant’s permanent file. I also understand that the completed form will not be made available to me or anyone outside the Saint Mary’s Hall Admission Committee. I waive any right to see it.

Parent or Guardian: ____________________________________________________________ Date: __________________

To the Recommender: The student named above is a candidate for admission to Saint Mary’s Hall. The school considers both a candidate’s academic and personal qualities when making its admission decisions. **The information you provide is confidential and will be used only in the selection of candidates.** It will not become a part of the candidate’s permanent file and will not be available to the candidate or to his/her parents. Please retain a completed copy of this form for your records.

How long have you known this candidate? __________________________________________

In what capacity do you know this candidate? ________________________________________

1. In what activity have you worked with this candidate? How long has he/she been involved? What level of skill and/or responsibility does he/she display? Has the candidate received any honors or recognition in this activity?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

2. How would you describe the candidate’s work ethic, self-esteem, and personal resilience?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

3. How well does the candidate respond to criticism and advice? How does he/she respond to setbacks?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
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4. What else would you like us to know about this candidate?
__________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________
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We would appreciate your observations in the following areas:

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<th></th>
<th>POOR</th>
<th>AVERAGE</th>
<th>GOOD</th>
<th>EXCELLENT (TOP 10% OF CLASS)</th>
<th>ONE OF THE TOP FEW ENCOUNTRED IN MY CAREER</th>
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<tbody>
<tr>
<td>Talent in this Area</td>
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<td>Dedication</td>
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<td>Concern for Others</td>
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<td>Leadership Skills</td>
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<td>Standards for Personal Integrity</td>
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<td>Respect Accorded by Peers</td>
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<td>Maturity</td>
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<td>Cooperation</td>
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<td>Adult Relations</td>
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Overall Recommendation

I recommend this candidate:
☐ Enthusiastically ☐ Confidently ☐ Recommend ☐ With Reservation ☐ Do Not Recommend

Name and Title: ____________________________________________________________
Organization Name and Address: _____________________________________________
Phone: (______) __________________________ Email: __________________________
Signature: _____________________________________________________________ Date: __________________________

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the student’s application and are very helpful to the Admission Committee. When completed, please send this form directly to the Office of Admission.

Please do not give a completed form back to the candidate or his/her parents.

Mailing Address: 9401 Starcrest Drive, San Antonio, TX 78217
Email: admission@smhall.org