



Loomis Chaffee

Office of Admission • 4 Batchelder Road • Windsor CT 06095 • Telephone 860 687 6400
• Email: admission@loomis.org • Website: www.loomis.org

PERSONAL RECOMMENDATION FORM

TO THE STUDENT: Please print your name, address and school below, and give this form and a stamped, addressed envelope to an adult who has worked with you in an activity or special interest you enjoy outside the classroom (i.e., arts, drama, dance, music, sports, scout leader, volunteer or paid work, etc.).

Student's name _____
LAST FIRST MIDDLE CURRENT GRADE

Student's address _____
STREET CITY STATE ZIP CODE COUNTRY

TO THE RECOMMENDER: The student named above is a candidate for admission. The Admission Committee is eager to learn from you about the applicant's aptitude, experiences and achievements in an activity outside the classroom. We would appreciate your candid and thoughtful responses. Submit the recommendation online, mail a copy of this form to Loomis Chaffee, or return in a sealed envelope to the student to be included with their application (postmarked by January 15, 2022). If you choose to submit your recommendation online, please provide the applicant with your email address so that you will receive an email that will allow you to submit the recommendation.

How long have you known the applicant and in what capacity?

In what activity have you worked with this applicant? How long have they been involved? What level of skill and/or responsibility do they display? Has the applicant received any honors or recognition in this activity?

How would you describe the applicant's work ethic, self-esteem and personal resilience?

Date submitted _____

How well do they respond to criticism and advice? How does the applicant respond to setbacks?

What else would you like us to know about this applicant?

Based on your experiences, please rate the applicant as realistically as you can:

	ONE OF THE TOP FEW I HAVE EVER ENCOUNTERED	EXCELLENT (TOP 10% THIS YEAR)	GOOD (ABOVE AVERAGE)	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGMENT
Talent in this area						
Dedication						
Concern for others						
Leadership skills						
Respect accorded by peers						
Overall evaluation as a person						

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the candidate's application. All information you provide will be held in confidence and disclosed only to the Admission Committee and others deemed necessary by the dean of enrollment.

NAME SIGNATURE DATE

ADDRESS EMAIL ADDRESS

CITY STATE ZIP CODE

When completed, please return to:

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