Faculty Recommendation for Transfer Students

This recommendation should be completed by a teacher of a core subject such as English, science, math, language or social studies, or by your faculty advisor.

**Applicant**

Please complete and sign the information in this section **before** giving this form to your faculty member.

Name ____________________________ Last First Middle ____________________________

Home Address ____________________________

City ____________________________ State ____________ Zip ____________ County ____________

☐ I waive my right to review this recommendation.
☐ I do not waive my right to review this recommendation.

Signature ____________________________ Date ____________________________

**Faculty Member**

Please be certain the student has completed the applicant section above before you complete this recommendation form. Attach additional pages if necessary.

Name ____________________________ Telephone ____________________________

Title ____________________________ E-mail Address ____________________________

In what capacity have you worked with this student? ____________________________

[ Continued on back ]
Please rate the student 1 to 5 on each of the following descriptions. Use the following scale

5 – Always exhibits this behavior.
4 – Usually exhibits this behavior.
3 – Occasionally exhibits this behavior, and needs to improve in this area.
2 – Seldom exhibits this behavior, and needs to improve in this area.
1 – Never exhibits this behavior, and needs to improve in this area.
N/A – I have no basis for this judgment.

_____ Demonstrates strong leadership ability and is a positive role model for his/her peers.
_____ Expresses him/herself well, both orally and in writing, demonstrating the ability to grasp ideas and develop his/her thoughts.
_____ Takes issues facing his/her generation seriously, either in classroom discussion, conversations with peers or volunteer actions.
_____ Accomplishes tasks and assignments with little supervision, showing strong motivation and initiative.
_____ Cooperates with faculty and students. Establishes good rapport with his/her peers.
_____ Uses good judgment and exhibits maturity when making decisions.

Additional comments about the above ratings


This student’s GPA is ___________________.

Does this student’s record (GPA) accurately reflect his/her academic potential?

☐ Yes  ☐ No

If not, please explain. Attach additional page(s) if necessary. __________________________________________________________

__________________________________________________________

__________________________________________________________

Of the students you have worked with at your current school, how would you rate this student?

☐ Upper 25%  ☐ Upper 50%  ☐ Lower 50%

How do you recommend this student?

☐ I strongly recommend this student with full confidence that he/she will be successful.

☐ I recommend this student with reservation, believing that he/she will be successful.

☐ I recommend this student with reservation, believing that he/she may be successful if he/she receives the proper support and direction.

☐ I do not recommend this student for admission to Baker University.

Signature ____________________________ Date ____________________________

Title __________________________________________

Mail completed form to:  Office of Admissions
Baker University
PO Box 65
Baldwin City, KS 66006