

To the applicant:

Complete the top section of this form to the heavy black line below. Give this form to a present or former teacher, principal, guidance counselor, college advisor or faculty member. The form should be returned to us via email (admissions@dillard.edu) by the recommender.

Applicant's Information

<i>Last Name</i>	<i>First Name</i>	<i>DU Student ID#</i>	
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
() - <i>Primary Number</i>	<i>Email Address</i>		
<i>School Name</i>	<i>City</i>	<i>State</i>	

The Family Educational Rights and Privacy Act of 1974, effective January 1, 1975, provided that an applicant, admitted to and enrolling at Dillard University is entitled to review records on file. If an applicant wishes his/her/their recommendations to Dillard University be submitted on a confidential basis, this right of access may be waived. If you wish this form to remain confidential, please sign below.

"I will not seek access to this confidential recommendation submitted on my behalf and used for admission only." By signing below, you will not have access to read or review this document once it has been submitted.

<i>Applicant's Signature</i>	<i>Date</i>
------------------------------	-------------

The above-named applicant has applied for admission to Dillard University. The applicant has been instructed to give the form to a recommender who is familiar with the student's academic abilities and background, or to a recommender who can speak to their leadership or character traits. Please complete this form promptly, and return it to the Office of Recruitment, Admissions and Programming via email. admissions@dillard.edu. You can attach additional or supporting documentation to support your recommendation for the aforementioned applicant.

Recommender's Information

<i>Last Name</i>	<i>First Name</i>	<i>Title</i>
() - <i>Work Number</i>	<i>Email Address</i>	
<i>Recommender's Signature</i>	<i>Date</i>	

Recommendation Type: Academic (Teacher/Principal) Counselor (Guidance/Advisor) Personal (Employer)

Recommendation Information

Please use the provided matrix to complete your recommendation for the applicant by placing an 'X' in the appropriate box per category. If you feel that the categories below do not speak enough to the student's character and abilities, please feel free to provide supplemental written support in addition to the categories provided

	Surpassing	Approaching	Satisfactory	Deficient	N/A
College Readiness					
Academic Proficiency					
Ability to Collaborate					
Critical Thinking					
Communication Skills (Verbal)					
Communication Skills (Written)					
Integrity					
Interpersonal Skills					
Leadership					
Problem Solving					