

applicant completes this section please print

I, (full name) _____ hereby authorize the release of my academic and personal records by (name of school) _____ for use as requested by Grace College and to respond candidly to the questions asked on this form.

Signature _____ Date _____

high school counselor or principal completes this section please print

Your assistance in the completion of this student's application file will allow us to serve his/her request for admission in a responsible and prompt manner. The student's application will not be evaluated until we have received this reference. We thank you in advance for taking the time to complete this form (this information is treated confidentially and is employed in evaluating the applicant).

The **OFFICIAL TRANSCRIPTS** you send must contain the following information:

- Applicant's full name
- Courses by year (including grades received)
- Courses currently in progress (if applicant is enrolled)
- Standardized test results
- Name and address of your school
- Signature of school official and date of signature

The student ranks (1 as top) _____ in a class of (total enrollment) _____ at the end of (number) _____ semesters on a (check one) weighted non-weighted ranking system. His/her current grade point average is _____ based on a 4-point scale.

This student (check one) was graduated (date)_____ will be graduated (date)_____ withdrew (date)_____

Our school is (check one) accredited regional accredited non-accredited

Our school is a (check one) public high school private high school Christian high school

Please rank the following characteristics to describe this student:

	Excellent	Good	Average	Below Average	No Evaluation
Intellectual curiosity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Motivation to study	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-discipline	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Character	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Energy level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What special strengths or qualities do you feel this student possesses?

Please list any areas where the applicant might need special attention:

I recommend this applicant (check one) enthusiastically strongly acceptably with reservations

Printed Name _____ Title/Position _____

Signature _____ Date _____ Phone _____

Check here if you prefer to discuss any of the above by telephone.

applicant completes this section please print

I, (full name) _____ authorize the Registrar of
(name of school) _____ to release my official transcripts for use as requested
by Grace College and to respond candidly to the questions asked on this form.

I last attended during _____ (term, quarter, semester) of _____ (year).

Student Signature _____ Date: ____/____/_____.

dean, registrar, or appropriate official of college/university completes this section please print

Note: The student's application will not be evaluated until we have received this reference.

Confidential Information We value your comments and ask that you give a candid report so that fair consideration may be given to the applicant (this information is treated confidentially and is employed in evaluating the applicant).

1. Regarding university citizenship, how strongly would you recommend this applicant:

- Strongly Acceptable With Reservations

2. Has this student ever been under academic probation or social discipline while attending your institution? Yes No

If yes, please give a brief explanation of the nature of the probation or offense:

3. Would this student be permitted to return to your institution in good standing at a later date? Yes No

If no, please indicate reason:

4. Any further comments (use additional paper if necessary).

Signature _____ Position/Title _____

Institution _____ Date _____

Thank you for taking the time to complete this form.

Please mail this completed form and the student's official transcripts directly to:

Grace College Admissions Office

200 Seminary Drive
Winona Lake, IN 46590

Telephone: 1-866-97-GRACE or 574-372-5100, ext. 6008