

OFFICIAL RECOMMENDATION FORM FOR HIGH SCHOOL STUDENTS

A completed application file consists of the following: Completed application with a signature Official High School Transcript Official ACT/SAT score report (unless student elects Test-Optional consideration; additional materials required)	Guidance Counselor's Recommendation Final High School Transcript showing date of graduation Official TOEFL score report (if applicable)					
Part I - To Be Completed by Applicant						
Name of Applicant						
SSN						-
Address						-
City						
High School Attending						-
Part II – To be Completed by Guidance Counselor						
First Name	Last Name					
Title/Position	_ Relationship to Student					
Institutional Name/Organizational Affiliation						-
Address						-
Daytime Phone Email					CEEB	-
Please rank the student on the following criteria:	Best	Good	Fair	Poor	<u>N/A</u>	
Academic Achievement						
Maturity						
Concern for Others						
1. Has the applicant ever been found responsible for a disciplinary violation at your school from the 9 th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal, or expulsion from your institution. Yes No School policy prevents me from responding						
2. To your knowledge, has the applicant ever been adjudicated guilty or convicted of a misdemeanor, felony, or other crime? [Note that you are not required to answer "Yes" to this question or provide an explanation if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded, or otherwise ordered to be kept confidential by a court. Yes No School policy prevents me from responding						
If you answered "Yes" to either or both questions, please attach a separate s each incident and explain the circumstances.	heet of pap	per or use	your writte	en recomme	endation to give the approximate da	ite of
Applicants are expected to immediately notify the institution to which they a cation, including disciplinary history.	are applying	g should tł	here be any	changes to	the information requested in this a	ıppli-
Check here if you would prefer to discuss this applicant over the phone w	vith the ad	mission of	ffice.			
I recommend this student: Enthusiastically Strongly Fairly	Strongly	With I	Reservatio	n 🗌 No B	asis	
Please attach a separate sheet to share any additional insight concerning this	s applicant.					
Signature of Counselor			Date			-
Return by fax (352) 588-8257 or email (below) or mail to: Saint Leo University — Admissions — MC 2008 — P.O. Box 6665 — Saint Leo, FL 33574-6665						

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