USC Summer Programs Recommendation Form 2017

Student legal name: ____________________________________________________________

Student Legal First Name ___________________________________________ Student Legal Last Name __________

Application Deadlines:
- Domestic Students: April 28, 2017
- International Students: March 24, 2017
- Summer Dance Intensive: March 1, 2017

Important Note: All admission decisions are made on a rolling basis as applications are completed with the exception of Summer Dance

TO THE RECOMMENDER:
The student named above is applying to the USC Pre-College Summer Program. Due to the intense nature of the summer courses, we can select only those students who demonstrate the intellectual and social maturity required to meet the challenges of a demanding college and residential (if appropriate) experience. We will use this recommendation only for USC Pre-College Summer Program admission purposes; it will not become part of the applicant’s educational records, and will remain confidential.

Please complete the following information regarding this student’s past academic achievement, readiness for an advanced curriculum and level of social maturity and personal integrity.

1. How long have you known this student? ____________________________

2. In what capacity (e.g. teacher, counselor) ____________________________

3. In the following section, please mark the applicant’s performance in comparison to the student’s peer group:

<table>
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<tr>
<th>Characteristic</th>
<th>Excellent</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>Unable to Judge</th>
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<tr>
<td>Emotional intelligence</td>
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<td>Integrity</td>
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<td>Maturity</td>
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<td>Motivation</td>
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<td>Productive Participation in class</td>
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4. Please attach a separate letter if more space is needed to comment on your experience with this student’s contribution to a positive learning environment in the classroom. It is recommended that the letter is a type-written narrative on professional letterhead.

I rate the applicant for admission as follows:

☐ Strongly Recommend  ☐ Recommended with Reservations
☐ Recommended         ☐ Do not Recommended that this applicant be admitted

We recognize the demand of this recommendation and appreciate your openness and honesty. Your comments will help us make an appropriate and informed admission decision regarding this student. Thank you for your time in providing a recommendation.

RECOMMENDER INFORMATION

Name __________________________________________________________________________

First ___________________________ Last ___________________________ Signature ___________________________ Date ___________________________

Email ___________________________ Phone (Area Code/Number) ___________________________

Please Return to: USC Summer Programs Office • 649 W. 34th St., Suite 108 • Los Angeles, CA 90089-1627

summer.usc.edu • 213.740.5679 • 213.740.6417 (fax) • summer@usc.edu