

Year and Section _____

ATENEO DE MANILA UNIVERSITY
 LOYOLA SCHOOLS
 Office of Admission and Aid

RECOMMENDATION FORM 1

INSTRUCTIONS

- To the Applicant:**
- A. Please write your name above **using ink**.
 - B. Give this form to the **person who knows you well enough** and currently holds a position of authority over you in your present school (e.g., guidance counselor – for freshman applicants, college professor – for transfer applicants).
 - C. Kindly supply him/her with an envelope.
- To the Person Recommending:**
- A. The student whose name appears above is applying to the Loyola Schools of the Ateneo de Manila University.
 - B. We value your candid and honest evaluation of this applicant. Based on your careful judgment, please fill out this form completely.
 - C. After filling out this form, please put it in an envelope, seal and sign across the flap and **return to the applicant**.
 - D. Countersign erasures and corrections made. All information will be kept confidential. Thank you for your assistance.

GENERAL EVALUATION (Please check the box that applies.)

	Above Average	Average	Below Average	No Chance To Observe
Communication Skills:				
Oral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistency of Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS

Your honest evaluation of the applicant will help the Committee on Admission and Aid to decide on his/her application (e.g., intellectual strengths and weaknesses, level of maturity, sense of service to school and community).

OVERALL RECOMMENDATION

- STRONGLY RECOMMENDED
- RECOMMENDED
- RECOMMENDED WITH RESERVATION (Please state reason/s on the lines provided above or on a separate sheet if needed.)
- NOT RECOMMENDED (Please state reason/s on the lines provided above or on a separate sheet if needed.)

PLEASE DO NOT LEAVE THIS PART BLANK

Accomplished by: _____ **Official Name of School:** _____

Signature: _____

Position: _____ **Complete Address:** _____

Subject taught: _____

Date Signed: _____ **Contact Number/s:** _____

LEGAL NAME _____ (Name in Birth Certificate) LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

Year and Section _____

ATENEO DE MANILA UNIVERSITY
 LOYOLA SCHOOLS
 Office of Admission and Aid

RECOMMENDATION FORM 2

INSTRUCTIONS

- To the Applicant:**
- A. Please write your name above **using ink**.
 - B. Give this form to the **person who knows you well enough** and currently holds a position of authority over you in your present school (e.g., guidance counselor – for freshman applicants, college professor – for transfer applicants).
 - C. Kindly supply him/her with an envelope.
- To the Person Recommending:**
- A. The student whose name appears above is applying to the Loyola Schools of the Ateneo de Manila University.
 - B. We value your candid and honest evaluation of this applicant. Based on your careful judgment, please fill out this form completely.
 - C. After filling out this form, please put it in an envelope, seal and sign across the flap and **return to the applicant**.
 - D. Countersign erasures and corrections made. All information will be kept confidential. Thank you for your assistance.

GENERAL EVALUATION (Please check the box that applies.)

	Above Average	Average	Below Average	No Chance To Observe
Communication Skills:				
Oral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistency of Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS

Your honest evaluation of the applicant will help the Committee on Admission and Aid to decide on his/her application (e.g., intellectual strengths and weaknesses, level of maturity, sense of service to school and community).

OVERALL RECOMMENDATION

- STRONGLY RECOMMENDED
- RECOMMENDED
- RECOMMENDED WITH RESERVATION (Please state reason/s on the lines provided above or on a separate sheet if needed.)
- NOT RECOMMENDED (Please state reason/s on the lines provided above or on a separate sheet if needed.)

PLEASE DO NOT LEAVE THIS PART BLANK

Accomplished by: _____ **Official Name of School:** _____

Signature: _____

Position: _____ **Complete Address:** _____

Subject taught: _____

Date Signed: _____ **Contact Number/s:** _____

LEGAL NAME _____ (Name in Birth Certificate) LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

Year and Section _____ Ateneo Application Number (AAN): _____

ATENEO DE MANILA UNIVERSITY
 LOYOLA SCHOOLS
 Office of Admission and Aid

SECONDARY SCHOOL RECORD AND PRINCIPAL'S RECOMMENDATION FORM

INSTRUCTIONS

- To the Applicant:**
- A. Please write your name above **using ink**.
 - B. Give this form to your **High School Principal** and supply him/her with an envelope.
- To the Principal:**
- A. The student whose name appears above is applying to the Loyola Schools of the Ateneo de Manila University. Please fill out this form accurately and completely.
 - B. The information about **rank** is extremely important. Please do not omit your answer for this part.
 - C. After filling out this form, please put it in an envelope, seal and sign across the flap and **return to the applicant**.
 - D. Countersign erasures and corrections made. All information will be kept confidential. Thank you for your assistance.

SECONDARY SCHOOL RECORD **NOTE:** Compute the average of the five subjects below for the YEARLY AVERAGE.

GRADE LEVEL	ENGLISH	FILIPINO	MATH	SCIENCE	SOCIAL STUDIES	YEARLY AVERAGE
Gr. 9 (20 ___ to 20 ___)						
Gr. 10 (20 ___ to 20 ___)						
Gr. 11 (20 ___ to 20 ___)						
SUBJECT AVERAGE						

1. Is the applicant eligible to apply for college? _____
 If **yes**, please check one: The applicant is currently on his/her last year of secondary education.
 The applicant has already finished his/her last year of secondary education.
2. Rank (**Do not omit this.**)
- a. Rank of applicant in whole batch at the end of last school year: _____
 - b. Number of students in whole graduating class: _____
3. Type of Section Honors Semi-Honors Science Section Arts Sports General No Honors Section
4. Type of School Public State University Science-Oriented Private Sectarian Private Non-Sectarian

PRINCIPAL'S RECOMMENDATION

5. Please check if the applicant is a candidate for: Valedictorian Salutatorian Honorable Mention
 Other honors (*please specify*): _____
6. Has the applicant been involved in any serious disciplinary case (e.g., cheating, stealing, fighting)? YES NO
 If yes, please state the offense, date and penalty and give your assessment of the student at present. _____
-
7. Has the applicant failed any subject/s at the **end** of any year level in high school? YES NO
 If yes, please specify the year level, subject and grade obtained. _____
-
8. Has the applicant ever repeated a year level in high school? YES NO Which year level/s? 1 2 3 4
9. Is the applicant under your high school's home school program? YES NO Not Applicable

PLEASE DO NOT LEAVE THIS PART BLANK

Accomplished by: _____ **Official Name of School:** _____
Signature: _____ _____
Position: _____ **Complete Address:** _____
Name of Principal: _____ _____
(if not the same as above)
Date Signed: _____ **Contact Number/s:** _____