



Recommendation of Teacher

Student – Complete this section:

Name (Family Name) First

Address

Telephone Number

Please read the following statements and sign the one you prefer:

I understand this evaluation is confidential and I waive my right to read it.

Student signature

or

I do not waive my right to read this form should I enroll at Bethel College and therefore this is not confidential.

Student signature

Teacher – Complete this section:

Please mark the appropriate space in each area to evaluate the applicant.

	Excellent	Good	Average	Below Average	Poor
Seriousness of purpose	_____	_____	_____	_____	_____
Ability of study	_____	_____	_____	_____	_____
Ability to communicate orally	_____	_____	_____	_____	_____
Ability to communicate in writing	_____	_____	_____	_____	_____
Initiative	_____	_____	_____	_____	_____
Responsibility	_____	_____	_____	_____	_____
Emotional stability	_____	_____	_____	_____	_____
Concern for others	_____	_____	_____	_____	_____
Overall Recommendation					
For academic promise	_____	_____	_____	_____	_____
For personal promise	_____	_____	_____	_____	_____
Comments:					

I have known the applicant for _____ years.

Signature Position Date

High School Name School Telephone Number

High School Address Country

Send to: Office of Admissions
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