



# General Recommendation Form

To the best of your ability, please rate the applicant in the following areas:

Attribute	Excellent	Above Average	Average	Below Average	Unable to Rate
a. Creativity					
b. Initiative					
c. Reaction to criticism					
d. Sensitivity to others					
e. Leadership					
f. Motivation					
g. Maturity					
h. Ability to work with others					
i. Professional competence/effectiveness					
j. Academic ability or potential					
k. Teaching skills					
l. Research skills					
m. Verbal communication skills					
n. Written communication skills					

Please explain how the applicant's strengths and weaknesses may affect her/his potential to succeed in academic settings.

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The Admissions Committee would appreciate any additional statement(s) you may wish to make concerning the applicant's capacity for academic work and her/his potential for a responsible and successful career.

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Please check one of the following to indicate the strength of your overall evaluation:

- Strongly recommend   
  Recommend   
  Recommend with reservations

**Recommender name and contact information**

Name \_\_\_\_\_

Title \_\_\_\_\_

Phone (day) \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please:**

**sign** the completed recommendation form, **make a copy** for your files, and **forward the original in a sealed envelope to:**



**Cambridge College  
Admissions Operations  
500 Rutherford Avenue  
Boston, MA 02129**

**or fax to: 617-242-0039**