



GUTENBERG COLLEGE

1883 University Street • Eugene, OR 97403
541-683-5141 • office@gutenberg.edu

Academic Recommendation

To the applicant for admission: Complete Section A, and give this form to a counselor, high-school teacher, college instructor, or someone who can attest to your academic abilities. Please also give the evaluator a pre-addressed, stamped envelope that can be sealed and returned directly to: **Admissions Committee, Gutenberg College, 1883 University Street, Eugene, OR 97403.**

SECTION A (please print):

Name of Applicant		Telephone	E-mail	
Street address		City	State	ZIP
<p>The Family Educational Rights and Privacy Act of 1974 provides permission for a matriculated student to have access to his/her file unless a waiver of that right has been signed. If you are willing to waive your right of access to this recommendation, sign your name in the space provided.</p> <p>I HEREBY WAIVE MY RIGHT OF ACCESS TO THIS LETTER OF RECOMMENDATION:</p>				
Applicant's signature		Date		

To the evaluator: The above-named applicant is applying for admission to Gutenberg College. Questions on page 2 are designed to guide you in providing Gutenberg College with an accurate assessment of the prospective student's academic capabilities. This information is for assessment purposes only and will not be the sole determiner of whether a student is accepted or not. Gutenberg College is first and foremost a ministry to students seeking an education that provides them with the tools to become lifelong learners who can interact with our society with integrity and honesty and from a biblical worldview. The program offered to accomplish these goals is deeply personal and academically rigorous. Thus, insight into a student's capability is necessary to afford the best chance of success.

You may write your answers in the space provided or use a separate sheet of paper. If you use a separate sheet, please complete Section B below and send this form with your answers. Thank you for your participation. —*The Gutenberg College Admissions Committee*

SECTION B (please print):

1. I have known the applicant for _____ year(s) in the following capacity: _____				
2. I recommend the applicant: <input type="checkbox"/> Enthusiastically <input type="checkbox"/> Strongly <input type="checkbox"/> Fairly strongly <input type="checkbox"/> With reservations				
3. I do not recommend the applicant: <input type="checkbox"/>				
Name of Evaluator		Telephone	E-mail	
Street address		City	State	ZIP
Title or Position		School/Organization/Other		
Evaluator's signature		Date		

