

WESLEYAN SECONDARY SCHOOL COUNSELOR RECOMMENDATION (FIRST-YEAR APPLICANT)

TO BE COMPLETED BY THE APPLICANT

After completing all the relevant questions below, give this form to your secondary school counselor or another school official who knows you well.

How are you applying to Wesleyan? Early Decision (Binding) (by November 15)
 Regular Decision/Scholarship Priority (by January 15)
 Regular Decision (applications accepted until classes full)

Legal name _____
Last (Enter name exactly as it appears on official documents.) First Middle (complete)

Birth date _____ Social Security # _____
mm/dd/yyyy (Optional)

Address _____
Number & Street Apartment # City/Town State/Province Country ZIP/Postal Code

School you now attend _____ CEEB/ACT code _____

Current year courses—please indicate title, level (AP, IB, advanced honors, etc.) and credit value of all courses you are taking this year. Indicate quarter classes taken in the same semester on the appropriate semester line.

First Semester/Trimester	Second Semester/Trimester	Third Trimester
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IMPORTANT PRIVACY NOTICE: Under the terms of the Family Educational Rights and Privacy Act (FERPA), after you matriculate you will have access to this form and all other recommendations and supporting documents submitted by you and on your behalf unless you waive your right to access.

- Yes, I do waive my right to access, and I understand I will never see this form or any other recommendations submitted by me or on my behalf.
- No, I do not waive my right to access, and I may someday choose to see this form or any other recommendations or supporting documents submitted by me or on my behalf to the institution at which I'm enrolling.

Signature _____ Date _____

I authorize all secondary schools I've attended to release all requested records and authorize review of my application for the admission process indicated on this form.

Signature _____ Date _____

TO BE COMPLETED BY THE SECONDARY SCHOOL COUNSELOR

Use this form to describe the applicant. If you need more space, feel free to attach additional information. An official copy of the applicant's transcript should be included indicating courses completed, current semester courses, record of testing to date, and designated honors or accelerated coursework. Include, if available, a school profile and transcript legend. The materials submitted in this report are subject to the provisions of the Family Educational Rights and Privacy Act (FERPA). Your recommendation will be used only for admission purposes and will not become part of the student's permanent record. Return this form with an official transcript prior to the deadline indicated above to: Office of Admission, Wesleyan College, 4760 Forsyth Road, Macon, Georgia 31210-4462, Fax: 478-757-4030. Thank you for your time and effort.

Counselor's name (Mr./Ms./Dr., etc.) _____
Please print or type

Signature _____ Date _____
mm/dd/yyyy

Title _____ School _____

School address _____
City/Town State/Province Country ZIP/Postal Code

Counselor's phone (_____) _____ Counselor's fax (_____) _____
Area Code Number Ext. Area Code Number

Secondary school CEEB/ACT code _____ Counselor's e-mail _____

Background Information

Class rank: _____ Class size: _____ Covering a period from _____ to _____.
(mm/yyyy) (mm/yyyy)

The rank is weighted unweighted. How many students share this rank? _____

We do not rank. Instead, please indicate quartile _____ quintile _____ decile _____

Cumulative GPA: _____ on a _____ scale, covering a period from _____ to _____
(mm/yyyy) (mm/yyyy)

This GPA is weighted unweighted. The school's passing mark is _____.

Highest GPA in class _____ Graduation date _____
(mm/yyyy)

Percentage of graduating class immediately attending: _____ four-year _____ two-year institutions

How long have you known this student and in what context? _____

What are the first words that come to your mind to describe this student? _____

Are classes taken on a block schedule? Yes No

Is the applicant an IB Diploma candidate? Yes No

If you offer AP courses, do you limit the number a student can take? Yes No

In comparison with other college preparatory students at your school, the applicant's course selection is:

most demanding

very demanding

demanding

average

below average

Ratings Compared to other students in her class year, how do you rate this student in terms of:

No basis		Below average	Average	Good (above average)	Very good (well above average)	Excellent (top 10%)	Outstanding (top 5%)	Top few (top 1%)
	Academic achievement							
	Extracurricular accomplishments							
	Personal qualities and character							
	OVERALL							

Evaluation Please write whatever you think is important about this student, including a description of academic, extracurricular, and personal characteristics. We welcome a broad-based assessment that will help us to differentiate this student from others. (Feel free to attach an additional sheet or another reference you may have prepared on behalf of this student.)

Has the applicant ever been found responsible for a disciplinary violation at your school from 9th grade (or the international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in the applicant's probation, suspension, removal, dismissal, or expulsion from your institution? Yes No

To your knowledge, has the applicant ever been convicted of a misdemeanor, felony, or other crime? Yes No

If you answered yes to either or both questions, please attach a separate sheet of paper or use your written recommendation to give the approximate date of each incident and explain the circumstances.

Check here if you would prefer to discuss this applicant over the phone with our admission office.

I recommend this student: No basis With reservation Fairly strongly Strongly Enthusiastically