



Grade School Recommendation Form

Name _____
Last First Middle

To the Student Applicant: This form should be given to your guidance counselor / class adviser who knows you well enough to answer the following questions and fill out the necessary information. Please provide him/her a business envelope addressed to the DLSZ Admission's Board through the Registrar/ Admission's Office.

To the Person Recommending: The student above is applying for admission to DLSZ. Please accomplish this form and put it in a business envelope provided by the applicant. **Seal and sign the flap of the envelope.**

I. On scale of 1 -5, how would you rate the applicant in terms of the following? Please check the corresponding column.

	Outstanding 5	Very Good 4	Good 3	Average 2	Poor 1	No chance to observe
1. Mental Ability						
2. Social Skills						
3. Leadership Skills						
4. Communication Skills a. Oral b. Written						
5. Study Habits						
6. Conduct / Character						

II. Has the applicant taken any psychological tests? Please list them down below.

Name of Test	Date Taken	Result	Interpretation



De La Salle Santiago Zobel School



Ayala Alabang Village, Muntinlupa City, Philippines, Tel. No.: 771-DLSZ Website: www.zobel.dlsu.edu.ph

III. Please check the box corresponding to the rank of the applicant in terms of his academic performance

() Top 10% () Top 25 % () Middle 50 % () Bottom 25%

Final Average in the Grade level last attended (If final grades are not yet available, please submit the grades as of the previous quarter / term.

English _____ Mathematics _____ Science _____

General Average _____

Approximate size of class: _____

Special skills/talent: _____

IV. Was the applicant ever involved in any disciplinary offense or misdemeanor? _____
Please specify the offense, date, and action taken by the school.

V. OVER - ALL RECOMMENDATION

_____ I highly recommend the student for admission.

_____ I recommend the student for admission.

_____ I recommend the student for admission with reservation.

_____ I do not recommend the student for admission.

Signature over Printed Name

Date

Title/Position

Name of Institution

Address

Telephone /Mobile Number