



Admissions Center  
 2544 Taft Avenue, Manila, Philippines 1004  
 Tel Nos: (+63) 230-5100 1801 to 1803  
 Email: admissions@benilde.edu.ph  
 Website: admissions.benilde.edu.ph  
 Office Hours: Mon-Fri. 8:00am-12:00nn  
 & 1:30pm-5:00pm/Sat. 8:00am-12:00nn

(As stated in Birth Certificate. Please PRINT or TYPE.)

STUDENT APPLICANT Surname \_\_\_\_\_  
 \_\_\_\_\_  
 First Name \_\_\_\_\_  
 \_\_\_\_\_  
 Middle Name \_\_\_\_\_  
 \_\_\_\_\_  
 Nickname \_\_\_\_\_  
 \_\_\_\_\_

Gender  Male  Female

**Recommendation Form**

Principal, Assistant Principal and Discipline Head

School: \_\_\_\_\_ Years Attended: \_\_\_\_\_ to \_\_\_\_\_

School Address: \_\_\_\_\_

**To the Applicant:**

Write the information needed above. This form is to be accomplished by the Principal, Assistant Principal/Discipline Head adviser only. The Center reserves the right to render the form invalid if the explanation for a substitute rater is unsatisfactory.

**Verification/Authorization:**

I knowingly and voluntarily consent to the disclosure and processing of my personal information and sensitive personal information (disciplinary records and special need, psycho-emotional condition and physical disability) contained in this application form to De La Salle-College of Saint Benilde for purpose of assessing my college application. This information will be shared with the members of the admission's committee. I waive my right to inspection and correction of the contents of this recommendation form.

\_\_\_\_\_  
 Printed Name and Signature of Applicant                      Date                      Printed name and Signature of Parent/Guardian                      Date

**To the Evaluator:**

The above person is applying for admission to De La Salle-College of Saint Benilde. Please give your assessment of the applicant carefully and fill out the form completely. After accomplishing this form, please return to the applicant in a sealed envelope with your signature across the flap. Unsealed and unsigned recommendation form will not be accepted. Thank you very much for your assistance.

**A. General Assessment:** How would you assess the applicant using the following criteria?

	Above Average	Average	Below Average	No Chance to Observe
Problem Solving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collaboration/Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation to study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**B. General Description.** Does the applicant have special learning needs, psychological-emotional condition, or physical disability that will need to be considered? Or has the applicant been involved in any serious disciplinary case?  Yes, please explain below.  No

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**C. Summary Evaluation.** Considering the applicant's character and attitude, your overall recommendation is:

Strongly Recommended     Recommended     Recommended with Reservation     Not Recommended

Explanation and/or comments: (Use extra sheet/s if necessary) \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Printed Name and Signature of Evaluator                      Tel./Contact Nos. \_\_\_\_\_  
 \_\_\_\_\_                      Date Accomplished \_\_\_\_\_  
 Position (Pls. tick one)     Principal                      Length of time acquainted with the applicant \_\_\_\_\_  
 Assistant Principal     Discipline Head