



STUDENT RECOMMENDATION FORM

COLLEGE ASSISTANCE MIGRANT PROGRAM • TEXAS STATE TECHNICAL COLLEGE
 1902 North Loop 499 • Harlingen, TX 78550
 Phone (956) 364-4562 • Fax: (956) 364-5126 • E-Mail: nballi@harlingen.tstc.edu



TO THE EVALUATOR: The student applicant named below is applying for admission to the Texas State Technical College through the College Assistance Migrant Program. Please evaluate the student in relation to his/her peers. A minimum of three recommendation forms are required as part of the application process. At least two recommendation forms must be from teachers from the student's graduating high school or GED Program. The remaining form may be a personal reference.

STUDENT APPLICANT _____ SCHOOL _____ SS# _____

EVALUATION TABLE	Excellent	Above Average	Average	Below Average	Unsatisfactory	Unable to Comment
1. Overall academic preparation	1	2	3	4	5	6
Comments						
2. Reading ability	1	2	3	4	5	6
Comments						
3. Mathematical ability	1	2	3	4	5	6
Comments						
4. Listening & note taking skills	1	2	3	4	5	6
Comments						
5. Writing ability	1	2	3	4	5	6
Comments						
6. Speaking skills	1	2	3	4	5	6
Comments						
7. Class participation	1	2	3	4	5	6
Comments						
8. Ability to work with others	1	2	3	4	5	6
Comments						
9. Ability to budget time wisely	1	2	3	4	5	6
Comments						
10. Ability to complete tasks	1	2	3	4	5	6
Comments						

