Reference Form

Educator/Employer for International Student

Undergraduate

2500 E. Nutwood Ave.
Fullerton, CA 92831 USA
1-714-879-3901 x1698
FAX: 714-681-7423
Email: undergrad@hiu.edu

UNDERGRADUATE ADMISSION

(Applicant must fill out to dotted line and sign before giving to reference. The reference must not be related to you.)

Applicant Name: _____
Last First Middle

Address: _____
Street City State/Country Postal Code

I am applying for (circle one): ESL Cert. AA BA MA

Initial one:

_____ I waive my right of access to see this recommendation. (A waiver is not required as a condition for admission)

_____I do not waive my right of access to see this recommendation.

_____ _____
Applicant's Signature (Required) Date

The individual named above has applied for admission to Hope International University. Please provide an evaluation of this person by completing this form to the best of your understanding.

1. How long have you known the applicant? _____ What is your relationship to the applicant?_____
2. How well do you know the applicant? (Circle one) quite well well casually
3. Please make concise but descriptive comments regarding the applicant in the following areas.

A. Ethics and morals _____

B. Academic ability for university level work _____

_____

C. Ability to interact well with others _____

_____

D. Emotional Maturity _____

_____

E. Ability to adapt to new environment and culture _____

_____

4. If admitted, what contributions would he/she likely make to church and society?_____

_____

Fill out <u>BOTH SIDES</u> of this form. ***Return completed reference to Hope International University, Attn:***
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5. If admitted, in what area(s) would the applicant need the most help? _____

   _____

6. Please share any facts that we should know about past or present experiences of the applicant which would better enable us to help the applicant pursue his or her academic goals (problem areas, weaknesses or outstanding achievements). _____

   _____

   _____

   _____

   _____

7. Please check one of the following:

   ❑ I recommend admission without reservation
   ❑ I recommend admission with some reservations
   ❑ I recommend admission
   ❑ I do not recommend admission

NOTE! If you checked either alternative on the right, please explain (attach additional sheet if necessary)

Your name (*please print*) _____

Signature _____ Date _____

Organization _____ Position _____

Home Address _____ Telephone (_____) _____ - _____