TEACHER RECOMMENDATION FORM

APPLICANT’S NAME ________________________________________________________________

The above-named student is applying to the SEARCH program at Mount Holyoke College and is requesting a recommendation from you. We appreciate your time in helping us get to know this student better. You may find details about SEARCH on our web site: www.mtholyoke.edu/proj/search

TEACHER INFORMATION

Name ____________________________________________
Position _________________________________________
E-Mail ___________________________________________
School Name _____________________________________
School Address ___________________________________
School Phone _____________________________________

Tell us how you know the above-named student (as teacher, advisor, club member, etc.) _____________
____________________________________________________________________________________

Below we ask you to summarize various aspects of your impressions of the student applicant. You may either answer in the spaces provided (and use additional space) or attach a letter covering the same areas.

Describe the student’s strengths as a learner: _____________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Describe any challenges or difficulties in learning experienced by the student: ________________
____________________________________________________________________________________
____________________________________________________________________________________

Discuss the student’s ability to collaborate with others: ________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Please tell us about anything else you think we should know about this student: ______________
____________________________________________________________________________________
____________________________________________________________________________________

Do you think this student is mature enough to live away from home for a month? Why or why not? ________________________________
____________________________________________________________________________________
____________________________________________________________________________________
Please send this form directly to SEARCH at the address below. You may send the form by mail, fax, or e-mail attachment. If you are replying in the form of a letter, please complete and include your contact information on the first page of the recommendation form.

Charlene & James Morrow, Directors
SEARCH @ SummerMath
Mount Holyoke College
50 College Street
South Hadley, MA  01075-1441
413-538-2608 (phone)
413-538-2002 (fax)
search@mtholyoke.edu