BERRY COLLEGE

Firsthand

Counselor Recommendation Form

Berry College Office of Admissions • P.O. Box 490159 • Mount Berry, GA 30149-0159
1.800.BERRYGA (Toll Free) • 706.236.2215 • www.berry.edu/admissions

To the applicant: After completing the information below, please give this form to your high school counselor.

Student name _____
Last/Family First Middle (spell out) Social Security Number

Address _____
Street City State/Province Postal Code

Current year courses — please indicate title and level (IB, AP, Honors) of all courses you are taking this year.

First Semester	*Level*	*Second Semester*	*Level*

To the counselor: Please complete the form and return it to Office of Admissions, Berry College, P. O. Box 490159, Mount Berry, GA 30149-0159.

High school graduation date _____

This candidate ranks _____ in a class of _____ students and has a cumulative grade-point average of _____ on a _____ scale.

In comparison to other college-preparatory students at your school, the applicant's course selection is
❒ most demanding ❒ demanding ❒ average ❒ less demanding than average

Has this student ever been placed on academic or disciplinary probation or suspension from any secondary school?
❒ yes ❒ no ❒ unable to answer

How long have you known the applicant, and in what context? _____

Compared with other college-bound students with whom you have experience, please indicate your perception of the applicant's attributes by circling the appropriate number in the range indicated below.

	Very unsatisfactory								*Excellent*	*Not observed*
Academic preparation	1	2	3	4	5	6	7	8	9	0
Work ethic	1	2	3	4	5	6	7	8	9	0
Initiative	1	2	3	4	5	6	7	8	9	0
Leadership	1	2	3	4	5	6	7	8	9	0
Concern for others	1	2	3	4	5	6	7	8	9	0
Emotional stability	1	2	3	4	5	6	7	8	9	0
Respect for others' beliefs	1	2	3	4	5	6	7	8	9	0
Acceptance of diversity	1	2	3	4	5	6	7	8	9	0
Integrity	1	2	3	4	5	6	7	8	9	0
Service to others	1	2	3	4	5	6	7	8	9	0

Please describe the student's academic and personal characteristics as they may pertain to the potential for success as a college student. (You may attach an additional sheet if necessary.)

_____

_____

_____

_____

_____

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_____

_____

_____

I recommend this student ❒ with reservation ❒ with no reservation ❒ highly

I would like to provide additional information about this student, and I would like to be contacted regarding this student. ❒ yes ❒ no

Counselor's name (please print or type) _____

Signature _____ Title _____

School _____

Office telephone _____/_____ Office fax ____ /_____

Counselor's e-mail address _____

High school CEEB/ACT Code _____ _____ _____ _____ _____ _____ _____

Berry College admits students of any race, creed, color, sex, age, religion, national and ethnic origin, or qualified handicap to all the rights, privileges, programs and activities generally accorded or made available to students at the college. Berry does not discriminate on the basis of race, creed, color, sex, age, religion, national or ethnic origin, or qualified handicap in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other college-administered programs.