

## **Recommendation Form:** Columbia University Summer Programs for High School Students

## To the student:

Please type or use a pen with black or dark ink and print clearly. Only completed applications will be considered.

If you are applying to the **Junior-Senior Division**, please fill in the information requested on this form and submit the form to an instructor who teaches in a field closely related to your chosen curricular option.

If you are applying to the **Freshman-Sophomore Division**, please fill in the information requested on this form and submit the form to an instructor familiar with your work.

If you are applying to **The Barcelona Experience**, the instructor to whom you submit this form must teach in a field related to one of the areas of the Barcelona Experience curriculum.

If you are applying to **Culture and History: Understanding the Arab World**, the instructor to whom you submit this form must be familiar with your level of maturity and your ability to study both independently and in a group setting.

## Information to be provided by the student:

In accordance with the Family Rights and Privacy A	ct of 1974, please indicate b	y signature v	which of the following options	you elect:				
☐ Confidential—I waive my right of access to this letter of recommendation.								
Signature								
☐ Nonconfidential—I retain my right of access to	this letter of recommendat	ion.						
Signature								
Print Name								
I am applying to:								
☐ The Barcelona Experience								
☐ Culture and History: Understanding the Arab W	Vorld							
☐ The Summer Program for High School Students								
☐ Junior-Senior Division								
☐ Freshman-Sophomore Division								
Curricular Option(s):								
Student's Name								
Student's Name								
Current Street Address								
City	State	Zip	Country					
Current Telephone	Email Address		Grade next Fall					



## Recommendation Form: Columbia University Summer Programs for High School Students (continued)

Information to be provided by the recommender:					
Recommender's Name	I am a(n):	☐ Instructor	☐ Guidance Couns	selor 🗖 Principal	☐ Headmaster
School					
Street Address					
City		State	Ziŗ	o Country	
Current Telephone		E-mail	address		
To the recommender:					
The student named on this form is apply write your evaluation of the student in t				gram named on th	e previous page. Please
If the student on whose behalf you are possible on his or her knowledge of the student is applying to <b>The Barcelona E</b> academic talents and potential to benef	chosen curricular opt experience or Cultur	tion and assess	his or her qualification	on to engage in co	ncentrated study. If the
If the student will be entering grade 9 or experience at Columbia.	10 in the fall, please o	describe his or h	er academic talents a	and potential to ber	nefit from an educational
Please enclose this form in an envelope	, sign across the seal,	, and return the	envelope to the stu	dent.	
				(c)	ontinue on next page)



<b>Recommendation Form:</b> Columbia University Summer Programs for High School Students (continued)				
Applicant Rating In addition to the recommendation det.	ailed above, we encourage you to use	the categories in the applicant rating section to expand		
upon the applicant's abilities.	-			
Please rate the applicant in relation to h 1: Exceptional 2: Outstanding 3: Good 4:				
Analytical ability:	Initiative:	Maturity:		
Oral communication skills:	Interpersonal relations:	Organizational ability:		
Written communication skills:	Leadership:			
I rate the applicant for admission as foll  Strongly Recommended	ows:			
<ul><li>Recommended</li><li>Recommended with Reservations</li></ul>				
☐ Do Not Recommend that this appli	cant be admitted			
For international students to feel co to 90 or above on the Internet-based To		eir coursework, an English language proficiency level equal		
Please rate the applicant's English langu	age proficiency:			
<ul><li>Native Speaker</li><li>At required level</li></ul>				
<ul><li>Below required level</li></ul>				