



**WISCONSIN**  
LUTHERAN COLLEGE

**TO THE APPLICANT**

We require a profile from an individual (preferably a non-family member) familiar with your capabilities and potential. Please fill in your name below. By signing below you waive the right to review this form after it has been completed. The recommendation portion of this evaluation can be completed by a non-family member, such as a pastor, employer, music teacher or coach.

**HOMESCHOOLED STUDENT RECOMMENDATION**

Applicant Name \_\_\_\_\_  
Last
First
Middle Initial

I waive my right to review the comments below and realize that the information will be treated in strict confidence.

\_\_\_\_\_  
Signature of Student
Date

**RECOMMENDATION**

How long have you known the student and in what context? \_\_\_\_\_

Completion of this section is optional. You may wish to complete all, part, or none of it. In making the following ratings, please check the most appropriate box.

	<b>Below Average</b>	<b>Average</b>	<b>Good (Above Average)</b>	<b>Excellent</b>	<b>Outstanding</b>	<b>No Basis for Judgement</b>
Academic Abilities						
Academic Motivation						
Leadership						
Potential for Growth						
Emotional Maturity						
Demonstrated Responsibility						

**ADDITIONAL COMMENTS**

Please comment about any particular qualities you have noted in this student that would help assess his/her potential for success.

\_\_\_\_\_  
 \_\_\_\_\_

Thank you for completing this evaluation. Your candid and objective appraisal is essential to the admissions process.

Signature \_\_\_\_\_ Occupation \_\_\_\_\_

Name (Print) \_\_\_\_\_ Phone \_\_\_\_\_

Date \_\_\_\_\_