

**LONG BEACH CITY COLLEGE**  
**The Honors Program**  
**RECOMMENDATION FORM**

Student's Name: \_\_\_\_\_ ID Number \_\_\_\_\_  
Last Name First Middle

High School or College Name and Address: \_\_\_\_\_

*In comparison to other students, I would rate this candidate as:*

	Exceptional	Above Average	Average	Below Average	No Basis for Comparison
Written expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Indicate the strength of your overall endorsement of this candidate:*

Highly recommend  Recommend  Recommend with some reservation(s)  Cannot recommend at this time

**Recommender's comments:** Please provide us with an assessment of the student. Of particular interest to the Honors Program Committee is the student's ability to succeed and develop academically and socially in a challenging curriculum. Include any special qualities about which the committee should know (additional letters of recommendation or comments on official letterhead may be attached to this form).

- Recommender's signature: \_\_\_\_\_ Date: \_\_\_\_\_
- Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_
- I know the applicant:  very well  fairly well  slightly Length of acquaintance with applicant \_\_\_\_\_
- I know the applicant in the following capacity:  counselor  teacher  other (please specify) \_\_\_\_\_

Thank you for completing this recommendation. Please send this form to:

The Honors Program (Y-4)  
 Long Beach City College  
 4901 East Carson Street  
 Long Beach CA 90808