Precollege Programs Recommendation Form

Student Name: _______________________________________________________

Program for which the student is applying: ________________________________

Year of high school graduation: ________

To the recommender: (if preferred, you may type your responses on a separate page)

1. Tell us about the student’s performance in your class. If possible, please comment on their work ethic, ability to handle academic setbacks, class participation, seeking help, helping others, and citizenship.

2. Please comment on the student’s maturity and, to the best of your ability, their capacity to successfully participate in a residential precollege program.

3. What are the student’s best qualities?

4. Is there anything else you would like us to know about the student?

____________________________________________________________________

Signature Date

____________________________________________________________________

Print Name

Your relationship to the student: _______________________________________

How long have you known this student? ________________________________

Send completed copy to: Smith Precollege Programs, 30 Belmont Ave., Northampton, MA 01063
Email: summerprecollege@smith.edu
Fax: 413-585-4344