

Recommendation Form

Recommendation Form: The person filling out this form please return by mail to Pamela Jimenez
Manhattan College.

Applicant Section: Please print

Name: _____

Last

First

Mailing Address _____

City _____

State _____ Zip code _____

Recommender Section: Please print (employer, teacher, pastor)

Recommender's Name _____

Company/Institution

Title _____ Phone _____

Address _____

City _____ State _____ Zip _____

How long have you known the applicant? _____ In what capacity? _____

In your opinion, is the applicant qualified for admission to the Camino Program at Manhattan College?

_____ yes _____ no Explain:

What do you consider to be strengths the applicant will bring to the Camino Program?

Recommendation:

_____ Highest: no reason

_____ Recommend

_____ Recommend: with reservations

_____ Do not recommend

PLEASE ATTACH ANY ADDITIONAL COMMENTS.

Recommender's Signature _____ Date _____

Please mail this form to:

Manhattan College
4513 Manhattan College Parkway
Riverdale, NY 10471