INTERNATIONAL STUDENT RECOMMENDATION FORM
University of the Incarnate Word

The applicant should fill his/her name and give this form to a teacher, tutor, or person well acquainted with his/her ability.

Name of applicant: _____
Family Name First or Given Name Middle Name

How long or in what capacity have you known the applicant? _____

Please list here your evaluation of the applicant's traits:

Integrity: _____

_____

Maturity: _____

_____

Motivation: _____

_____

Intellectual ability: _____

_____

Relations with peers: _____

_____

Dependability: _____

_____

Other strengths and/or weaknesses: _____

_____

Other observations and/or recommendations: _____

_____

Would you recommend the applicant for admission to Incarnate Word? _____

Name of endorsing party: _____

Signature _____ Date: _____/ _____/ _____/

Please enclose this form in a sealed envelope and return to applicant or send directly to:

University of the Incarnate Word
Admissions Office
4301 Broadway
San Antonio, Texas 78209
U.S.A.