

AV ID: CALARTS ID:

CaLARTS LETTER OF RECOMMENDATION

24700 MCBEAN PARKWAY, VALENCIA, CA 91355-2340 USA

PART I

To be completed by the applicant. Sign before giving this form to your recommender.

| | | |
|---|---------------------------|-------------------|
| Applicant's Legal Last Name (family) | Legal First Name (given) | Legal Middle Name |
| Program to Which You Are Applying | Applicant's Email Address | |
| Name of Recommender | Relationship to You | |
| Signature of Applicant (Missing signature will render the confidential clause null and void.) | Date | |

PART II

To be completed by the applicant. Sign before giving this form to your recommender.

The applicant named above has requested your recommendation for admission to CalArts. We would greatly appreciate your appraisal of the applicant on the basis of his or her past performance in a creative and/or classroom setting and your perception of his or her talent, professional promise and scholastic aptitude. Please assess the student's strengths and weaknesses and write your comments on the back of this form or attach a letter on your letterhead. Thank you very much.

| | | | |
|---------------------------------|----------------------------------|---------------------------|---------|
| Signature of Recommender | Name (in case left blank above) | Date | |
| Title | Institution/Organization/Company | Relationship to Applicant | |
| Number and Street (apartment #) | City, State/Province | Zip/Postal Code | Country |
| Telephone Number | Fax Number | Email | |

MAY WE CONTACT YOU IF WE HAVE QUESTIONS?

☐ Yes ☐ No

SIGNATURE

To be completed by the applicant. Please read the following statement and sign below.

California Institute of the Arts reserves the right to solicit information from the personal references provided by the applicant. All submitted records, including letters of recommendation, transcripts, credentials, test scores and statements, become part of your application file and can not be returned.

| | |
|------------------------|------|
| Signature of Applicant | Date |
|------------------------|------|