



All candidates for admission to California Lutheran University are required to submit one letter of recommendation from a teacher or guidance counselor. Additional letters from other teachers, coaches, music instructors, or pastors are welcome, but are not required. Written recommendations on school letterhead are acceptable provided the questions on this form are addressed.

APPLICANT: Please complete the information below before giving this form to a teacher.

Name:

First Name	Middle Name	Last Name		Preferred Name/Nickname		
					()
Address		City	State	Zip		Phone

TEACHER: This section should be completed by a teacher who knows the candidate well and has taught the candidate in an academic subject. **This information is to be used solely for the admission process and will be removed from the student's file upon enrollment**.

I. How long have you known this student?_____ In what capacity have you known this student?_____

2. In what course or courses have you taught this student?____

3. What three or four words first come to your mind when describing this student?_____

4. Please describe this student's ability to communicate effectively and get along well with others.

5. Please elaborate on the student's qualities in the areas of leadership, creativity, and self-motivation.

PLEASE COMPLETE BOTH SIDES OF THIS FORM

6. Please discuss an occasion on which you've seen the student grow or in which you've gained insight into the student's personal character.

7. From your experience and observation, please discuss this student's skill in gathering and organizing information, processing it coherently, and presenting it effectively.

8. The Admission Committee is interested in admitting students who can and will contribute to the CLU community, collaborate with professors, challenge themselves, display independence in their academic coursework, and enjoy their four years at CLU. In the space below, please comment on these and other items you believe would assist the Admission Committee in making a decision in the candidate's best interest.

9. How familiar are you with CLU?

I know CLU well	□ I am somewhat familiar with CLU
Lam a CLU alum Class of	

 \Box I know very little about CLU

The candidate's application for admission will not be reviewed until this recommendation is filed with the Admission Office. Thank you for your time and effort in completing this recommendation.

Recommender's Name (please print or type)	School Telephone Number @			
Name of School	E-mail Address			
School Address				
School Mailing Address (if different)				
Signature	Date			

CLU • 60 W. Olsen Road • Thousand Oaks, CA 91360 • Phone: I-877-CLU-FOR-U • Fax: 805-493-3114 • cluadm@CLUnet.edu