

Application for Admission Teacher Evaluation Form

Deadline: March 1, 2016

SECTION 1 (To be completed by the applicant)

pplicant's Name	First	Middle/Father		Last/Family
				,
Name of School		City	Country	Postal Code
Waiver of Access				
known as the Federal Edu				ie Mellon University. Under a U.S. law eview your educational records. The act
Please indicate your inte	ntion regarding access to th	nis report by checking one of the follow	ving options:	
I waive access to this	recommendation, which wi	II therefore be considered confidential	I do not	t waive access to this recommendation
Student's Electronic Signa	ature (type name)		Date	
	CECTIO	N 2 (T)		
	SECTIO	N 2 (To be completed by th	e applicant's teachei	r)
ted and enroll at Carn		n Qatar. If the applicant does not v		ords should the student be admithis or her educational records, this
What subjects or classe	es have you taught the ap	oplicant?		
Most recent class with	applicant?	How	long have you known the	e applicant?
In your most recent cla	ass with the applicant, ple	ease approximate the rank of the ap	oplicant's academic perfo	rmance versus other students in the clas
Applicant's rank:	out of student	s in class or check one box Top 19	6 in class Top 5%	Гор 10%Тор 25%Гор 50%Ве
		mendation for this student comm ges are attached, please include tl		academic abilities, performance in ent on each page.
Teacher's Signature			Date	
Please print name*		Position	or Title	
Email			Official School	Stamp placed here
Telephone			Official School Stamp placed here (required if recommendation letter is not	
*This form can be include	d with the transcript in the e	avalone sent by the	provided on offic	ial school letterhead)

 $school, or the {\it applicant should provide you with a stamped, addressed}$

envelope to send this form directly to: