Kankakee Community College

Baccalaureate Scholars Program Instructor or Counselor Recommendation

To the applicant:

Please complete the following two sections and give this form to a guidance counselor, high school instructor, or KCC credit-in-escrow instructor.

| Student's name: | | | |
|--|--|--|--|
| | | FIRST | MIDDLE (FULL) |
| Mailing address: | | | |
| City: | _State: ZI | P code: | |
| High school: | | | |
| nstructor or counselor name: | | | <u> </u> |
| | he Family Educa | tion Rights of Privacy | ssions process for the KCC Baccalaureate Act of 1974, I have indicated my intention |
| ☐ I waive access to this report, whi☐ I do not waive access to this report. | | remain confidential. | |
| Student's signature authori | zing release | Da | ate |
| with challenging course work and intelle advisement and educational planning to Scholars are granted full-ride scholarshi activities. | empetitive entry pectual content. The transfer into high ps to KCC, as w | orogram that provides ne scholars receive pe hly selective four-year | selected academically talented students rsonalized assistance with course colleges and universities. Baccalaureate |
| Please complete and return this form to Kankakee Community College Baccalaureate Scholars Program 100 College Drive Kankakee, IL 60901 | : | | |
| 1. How long have you known the app | licant? | | |
| | | | |
| If you taught this applicant, what s | ubject did you t | teach this student? _ | |

3. Please complete a summary appraisal of the student (on page 2). Or, attach your recommendation.

| Please use the space below to write a summary appraisal of this stude College Baccalaureate Scholars Program. Please assess his or her a college. | cademic and personal promise as a | student in |
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| Signature | Date | |
| Signature | | |
| Name (please type or print) | Position | |
| | | |

Thank you for your time and assistance.