

Lake Forest College

Teacher's/Professor's Recommendation



LAKE FOREST
COLLEGE

To the Applicant

After you have filled in the information below, give this form to the teacher of your choice. Please supply this person with a stamped envelope addressed to Office of Admissions, Lake Forest College, 555 North Sheridan Road, Lake Forest, Illinois 60045.

Applicant's name _____
(Please Print) Last First Middle

Applicant's address _____
Street

City State Zip Code

This form is due by:

First Year Students

- Early Decision—December 1 (binding)
- Early Action—December 1 (non-binding)
- Regular Decision—February 15

Transfer Students

- Fall Semester—June 15
- Spring Semester—December 1

To the Teacher or Professor

The above-named student has applied for admission to Lake Forest College. Your comments about this applicant will be valuable to us and will be kept in the strictest confidence. This form will **not** become a part of the student's permanent record. ***Feel free to submit the letter on your school's letterhead if preferred.***

How long have you known the applicant? _____

In which subjects have you taught the applicant? _____

Please tell us what you can about the applicant as a student. In addition to comments you may wish to make about the candidate's academic strengths and weaknesses, please include information about this student's study habits, motivation for academic work, breadth and depth of intellectual interests, originality, and capacity for growth. Please attach an additional sheet if necessary.
