

SCHOOL COUNSELOR RECOMMENDATION

FALL PRIORITY APPLICATION DEADLINE:
November 1, 2009 (postmarked)

FALL REGULAR APPLICATION DEADLINE:
January 20, 2010 (postmarked)

TO THE APPLICANT: Please print this form and complete the answers to items one through seven in blue or black ink. Then give this form to your school counselor.

1. _____
NAME OF HIGH SCHOOL

2. _____ - _____ - _____ 3. Birth date _____ / _____ / _____
U.S. SOCIAL SECURITY NUMBER MONTH DAY YEAR

4. Please use the name that appears on your transcript so we may properly match your documents.

LAST NAME (family name) FIRST NAME (no nicknames) MIDDLE NAME

5. Date this form was submitted to your school counselor _____ / _____ / _____ _____
MONTH DAY YEAR SCHOOL CEEB CODE

I authorize my high school counselor to release a recommendation and other information to the University of Maryland.

6. Applicant's signature _____ 7. _____
DATE

TO THE COUNSELOR:

Please complete the sections below and return this form with the applicant's official high school transcript and a school profile. In addition, please attach a letter of recommendation. This form is used for admission consideration to the university and special programs; thus we appreciate submission of this completed form, as well as the letter of recommendation. **Please include the applicant's full name, Social Security Number and birth date on any additional pages you submit.**

COUNSELOR'S NAME

COUNSELOR'S TELEPHONE NUMBER COUNSELOR'S E-MAIL

COUNSELOR'S SIGNATURE DATE

Please include the student's full name, Social Security Number and birth date on all additional pages you submit. Mail to:

Office of Undergraduate Admissions
Mitchell Building
University of Maryland
College Park, MD 20742-5235
301.314.8385 (phone)
301.314.9693 (fax)
um-admit@umd.edu (e-mail)

ACADEMIC PROGRAM

Compared with other college-bound seniors in your high school, the quality and rigor of this student's academic program is primarily:

- Below average Average Above average Very rigorous Highest possible program
(a few advanced-level courses (but short of highest possible)
- such as Honors/AP courses)

GRADE POINT AVERAGE

Please provide this student's grade point average for all course work completed to this point on a 4.0 scale:

____ / 4.0 Unweighted GPA ____ / 4.0 Weighted GPA ____ / ____ Other scale GPA (include a high school profile)

RECOMMENDATION

Please give us your professional recommendation regarding this student's preparation for study at the University of Maryland.

- Not recommended Highly recommended
 Recommended with reservations Highest possible recommendation
 Recommended Insufficient knowledge of this student to make a recommendation

CLASS RANK

This student ranks _____ out of a class of _____. If this student is ranked first, how many other students share this ranking? _____

If exact rank is not computed, please provide your best estimate:

- below the top 50 percent of the class top 50 percent of the class top 25 percent of the class top 10 percent of the class

This class rank or estimate is based on grades that are: Weighted Unweighted

Reminder: Please print, complete, sign and mail all documents.