TO THE STUDENT: This recommendation should be given to an adult who is not related to you, but who knows you well. You may choose anyone who interacts with you on a regular basis and who knows you through one of your interests: an additional classroom teacher, for example, or an employer, a music instructor, a coach, or a member of the clergy. Before giving this form to your recommender, please write your name and school below. You may use this form and/or the Special Interest Recommendation.

Student's name ___________________________________________________________________________________________________________

School _________________________________________________________________________________________________________________

TO THE RECOMMENDER: The student named above is a candidate for admission to Groton School. The Admission Committee places considerable weight on the personal qualities of each applicant. Your recommendation is vital to our process. We would appreciate your most candid and thoughtful responses. Please return this form to us by January 15.

In what context and for how long have you known the applicant?

What are the first words that come to mind to describe the applicant?

What do you feel is this individual's greatest strength?

Where do you see the most room for growth in this applicant?

Please comment on the applicant’s performance in and commitment to extracurricular, community, or work involvements.
What do you feel will be the applicant's contributions to a boarding school community? Please include in your response your reflections on the applicant's personal integrity, concern for others, dependability, respect accorded by peers, and respect accorded by adults.

Please add any additional information that will give us a more complete picture of the candidate.

I recommend this student for admission to Groton School:

- Enthusiastically
- Strongly
- Mildly
- With reservation
- Not at all

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the candidate's application. Please sign this form and return it to the candidate in the enclosed envelope by January 15. To ensure confidentiality, please seal and sign the back of the envelope.

__________________________________________________________
Signature

__________________________________________________________
Date

__________________________________________________________
Printed Name

__________________________________________________________
Relationship to Applicant

__________________________________________________________
Mailing Address

__________________________________________________________
Telephone

__________________________________________________________
Email