



Our Lady of Mercy School of Quezon City

Shaping The Future Today

Commonwealth Ave., Cor J.P.Rizal, Batasan Hills, Quezon City 1126 Ph:+632-3428-4745 www.olms.edu.ph

RECOMMENDATION FORM

(To be filled out by the Guidance Counselor or Adviser)

NAME OF STUDENT _____
Family Name First Name Middle Name

Name of Last School _____

School Address _____

School Tel No. _____ Applying for Admission (Grade Level) _____

TO THE GUIDANCE COUNSELOR OR ADVISER

This form is a confidential report written on behalf of the student named above and will be used solely for the purpose of admission. We would benefit from your perspective in providing us with impressions of the student's personal qualities and contribution to your community. After accomplishing the form, please email a scanned copy of the recommendation form to – admin@olms.edu.ph
Thank you.

1. Student's Qualities

Please assess the applicant by checking the appropriate boxes below:

Qualities	Excellent	Above Average	Average	Below Average	Poor
Ability to learn					
Intellectual capacity					
Ability to work independently					
Ability to work with others					
Communication skills					
Self-confidence					
Social relationship					
Leadership potential					
Self Discipline					

2. Student's Performance

The student belongs to:

_____ Top Ten _____ Upper 25% _____ Middle 25% _____ Lower 25%

3. Has the student been involved in any disciplinary case? _____ Yes _____ No
If Yes, please indicate the offense(s) and sanction(s)

4. What are the strength(s) of the student?

5. What areas can the student improve on?

6. Does the student have any family/peer problem(s) that may have an effect on the student?
_____ Yes _____ No

If Yes, please describe _____

OVERALL RECOMMENDATION OF THE GUIDANCE COUNSELOR OR ADVISER:

_____ I strongly recommend

_____ I recommend with reservation

_____ I recommend

_____ I do not recommend

Name: _____

Signature: _____

Position: _____

Date: _____



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ACADEMIC RECORD AND PRINCIPAL'S RECOMMENDATION FORM

(TO BE FILLED OUT BY THE PRINCIPAL)

NAME OF STUDENT _____
Family Name First Name Middle Name

Name of Last School _____

School Address _____

School Tel No. _____ Applying for Admission (Grade Level) _____

TO THE PRINCIPAL

This form is a confidential report written on behalf of the student named above and will be used solely for the purpose of admission. We would benefit from your perspective in providing us with impressions of the student's personal qualities and contribution to your community. After accomplishing the form, please email a scanned copy of the recommendation form to – admin@olms.edu.ph
Thank you.

FINAL GRADE					
SUBJECTS	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Average
CLE					
READING					
LANGUAGE					
HEKASI					
MATH					
SCIENCE					
MAPE					
HELE					
CONDUCT					

GENERAL AVERAGE _____

At the end of the _____ grading period his/her general average is _____.

1. Scholastic Standing

_____ Top Ten _____ Upper 25% _____ Middle 50% _____ Lower 25%

2. Type of Section:

_____ Honors _____ Semi-honors _____ No Honor Section

3. Type of School:

_____ Public _____ Private Sectarian _____ State University _____ Private Non-Sectarian

4. Is the student a candidate for honors?

_____ Yes _____ No

5. Has the student failed in any subject(s) in previous years? Please specify subject(s) and grade(s) obtained.

6. How long have you known the applicant? _____

OVERALL RECOMMENDATION OF THE PRINCIPAL:

_____ I strongly recommend

_____ I recommend with reservation

_____ I recommend

_____ I do not recommend

Name: _____

Signature: _____

Position: _____

Date: _____

Please affix
School Seal
Here