

# RECOMMENDATION FORM

## Commonwealth Honors Program at BHCC

**Student Information (to be filled out by the student):**

Name \_\_\_\_\_ BHCC Email \_\_\_\_\_  
 Course taken with recommender and semester taken (if applicable) \_\_\_\_\_

**Recommending Faculty:**

Name \_\_\_\_\_ Email \_\_\_\_\_  
 Position / Department / College \_\_\_\_\_

**Please evaluate the student by checking the box that you believe best describes him/her in terms of the specific abilities or qualities listed below. You can also offer brief remarks about each quality of the student if you like.**

	Fair	Good	Very Good	Excellent	Brief Remarks
Academic ability					
Writing skills					
Critical thinking					
Maturity					
Motivation					
Intellectual Curiosity					
Initiative					
Creativity					
Ability to work with others					

**Do you recommend this student for the Commonwealth Honors Program at BHCC? (Circle)**

No                     
  Yes, with reservations                     
  Yes, with enthusiasm

**Please feel free to share other comments you have about the student. In addition to this form, you may choose to attach a letter.**

\_\_\_\_\_

**Faculty Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please seal this recommendation form in an envelope, sign it across the seal, and have the student deliver it to the Honors Center at Room E-145. Thank you for completing this recommendation form. We appreciate your time and effort.**

