

COLEGIO DE LAS HIJAS DE JESUS, INC. GUIDANCE CENTER

Ledesma Street, Iloilo City, Philippines Email Add: <u>guidance@chjiloilo.edu.ph</u> Tel. No. (033) 337-25-20/ 0951-4265-889

RECOMMENDATION FORM

TO THE APPLICANT:

Kindly complete the information below. Give this form together with an envelope addressed to the **GUIDANCE PERSONNEL**, **COLEGIO DE LAS HUAS DE JESUS, INC., LEDESMA ST., IL QUI O CITY** to your Adviser or Guidance Counselor

Name:					
Last	First			Middle	
Complete Name of Current/Former					
Complete Address of School:					
Contact Number of School:					
Ouration of Stay in the School:					
THE ADVISER/ GUIDANCE	COUNSELOR:				
ease accomplish this form and place					f your assessm
ease seal and sign the flap of the e How long and in what capacity	-	-	eiopes will not be acc	ертеа.	
Please check on the space whi	ch corresponds t	o your assessmen	ıt.		
Personal Characteristics	Excellent	Good	Average	Poor	No Basis
lental Ability					
ral Communication Skills					
/ritten Communication Skills					
eadership Skills					
Study Habits					
Maturity					
Respect to Self and Others					
nterpersonal Skills					
Simplicity					
Honesty and Trustworthiness					
Self-discipline					
Sense of Responsibility					
Creativity					
nitiative					
Titiative					
Does the applicant have any leaplease explain on the space pro		hat you are aware	of? If you believe he	s/she would need	l special attenti
. Please state other details which	n could be of help	o in the assessmen	nt of the applicant.		
Recommendation (Please chec	k)				
I STRONGLY RECOMMEN	D the applicant				
I RECOMMEND the applica	int				
I RECOMMEND THE APPL	ICANT WITH RES	SERVATIONS due t	0		
I DO NOT RECOMMEND th					
	е аррисант				
	Thank you for	the time you devoted	in accomplishing this fo	rm!	