

SECTION 6: OPTIONAL PROFESSOR'S EVALUATION

If you wish to submit an academic recommendation, present this form to the college professor who knows you best as a student. Your inclusion of a stamped, addressed envelope will make it easier for your professor to assist you.

Please be sure this form reaches Notre Dame before the November 1 deadline for Spring Semester application
 April 15 deadline for Fall Semester application

Student's full name Last First Middle

Student's address Street address City State/Province ZIP/Postal code

College name and address City State/Province ZIP/Postal code

I hereby waive any rights I may have to examine this confidential Professor's Evaluation.

Signature of applicant Date

PART II—DIRECTIONS TO THE PROFESSOR

You have been chosen by this applicant to submit an academic evaluation. We are grateful for your help and cooperation. Please address this student's intellectual qualities, academic work, character, and contributions to your class. Your evaluation should be attached to this form. Keep in mind that the most effective evaluations contain specific, anecdotal evidence. Please make certain that the college name and address, as well as the student's name, appear on each page of the stationery. We suggest you retain a copy for your files. Please note the deadline checked above and forward to the Transfer Admissions Committee, University of Notre Dame, 220 Main Building, Notre Dame, IN 46556-5602. Thank you.

Professor's name Course taught to applicant

College name and address City State/Province ZIP/Postal code

Transfer Admissions Committee
Office of Undergraduate Admissions
 University of Notre Dame
 220 Main Building
 Notre Dame, IN 46556-5602