MT. SAN ANTONIO COLLEGE BRIDGE PROGRAM

PEER ADVISOR RECOMMENDATION



NAME OF APPLICANT		STUDENT ID #				
SIGNATURE DATE						
The individual named above has applicated Committee places great importance of judgment on the applicant's leadershi	n the recommendati	on of college fac	culty member	s and others qu	alified to render	
PLEASE PRINT OR TYPE:						
Your Name		Titl	le			
College or Company Name						
Telephone Number		Em	nail:			
How long have you known the application what capacity?						
In comparison with other students yo					the following qualities:	
Intellectual ability Maturity Ability to work with others Written skills Oral skills Responsibility Adaptability Organization Ability to follow directions	Below Average (Bottom 1/3) wer the follow	Average (middle 1/3)	Good (Top 1/3)	Outstanding (Top 5%)	Inadequate opportunity to observe to the next page	
	strongly recommer		recommend			
L	recommend with r	eservations L	not recomm	nended		
Signature:				Date:		

. Please explain your assessment of this student's leadership potential, ability to take initiative
nd/or potential success as an Peer Advisor.
,
. Do you have any additional comments that may be helpful as we consider this candidate?