

MEXICAN AMERICAN CATHOLIC COLLEGE

Registrar's Office | 3115 W Ashby Place | PO Box 28185 | San Antonio TX 78228
210-736-2963 (fax) | 210-732-2156 (phone) | registrar@maccsa.org

Reference for Admission

Applicant's Instructions: Please complete Sections A and B of this form and then give one copy to your referrer, who should return this form. You may want to also provide your referrer with the resources to return this form –a stamped envelope addressed to MACC or the Registrar's Office email address.

A. Applicant Data

applicant's last, first and middle names | id number (to be completed by Registrar's Office)
address (line 1) | email (personal)
address (line 2) | phone
city, state | zip | country (if other than US) | school you now attend (if applicable)

B. Right to Access

Information about Student Rights is available in the Academic Catalog. Federal Law requires letters of reference be made available to students who enroll in the Mexican American Catholic College. Applicants may waive their right to access. Applicants who do not waive their right and/or who do not sign and date below will be permitted to read their letters of reference should they enroll in the college.

[] I waive my right to access. or [] I do not waive my right to access

applicant's signature | date

Referrer's Instructions: Based on your personal and/or professional knowledge of the applicant, please complete Sections C, D and E.

Before you include your information and comments, please know that we sincerely thank you for taking the time to help the Admissions Committee in its evaluation of this applicant. Your candid comments will help us to determine the suitability of the candidate for our programs and to identify the strengths and weaknesses of the candidate for placement purposes.

C. Referrer Data

referrer's last, first and middle names | How long and in what context have you know the applicant? ___ yrs ___ mos
title and employer | Context:
address (line 1) | email
address (line 2) | phone(s)
city, state | zip | country (if other than US)

<< Continue to Sections D and E on the reverse side of this form. >>

D. Ratings and Evaluation

In the table below, please rate the applicant in the categories listed by placing a check mark within the appropriate box, noting that a rating of zero (0) identifies a category for which you are not able to provide a rating. There are five ratings, one (1) is the lowest and five (5) is the highest as noted below.

category/characteristic	0 cannot evaluate	1 needs development	2 below average	3 average	4 above average	5 excellent (Top 10%)
dependability						
intellectual potential						
academic accomplishment						
quality of writing						
creative, original thought						
analytical reasoning						
ability to synthesize						
disciplined work habits						
maturity						
motivation						
leadership						
ability to overcome obstacles						
concern for others						
initiative						
ability to work and think independently						
healthy relationship with peers						
facility with languages						
overall rating						

After completing the ratings, based on your knowledge of the applicant, please describe on a separate sheet of paper your assessment of his/her abilities and potential for successful engagement in a liberal arts program, commenting specifically on 1.) the student’s capacity for respectful consideration of the intellectual viewpoints of others, 2.) the student’s capacity for thoughtful consideration and examination of his/her own ideas and beliefs, 3.) the student’s strengths and weaknesses and 4.) any other relevant observations.

Because MACC emphasizes the education of the whole person, we welcome comments pertaining to both personal and academic aspects of the student’s character. You may also elaborate on any of the above characteristics of the student that you think merit further comment, especially those that are important to understanding the student’s suitability for and potential success at MACC.

E. Recommendation

Please make an explicit statement of recommendation for admission and then sign and date this form.

_____ date

referrer’s signature

<< *Submit the completed form and any attachments to MACC.* >>