Student’s Name: ___________________________________________ Current Grade Level: ____________
Teacher’s Name: _________________________________________ Subject: __________________________
School’s Name: __________________________________________
School’s Address: __________________________________________________________________________
Teacher’s Email Address: __________________________________________________________

Xavier University of Louisiana
SOAR Summer Enrichment Program
Teacher Recommendation Form

The above named student has applied to the SOAR summer enrichment program. SOAR: Stress On Analytical Reasoning is a residential three week program hosted at Xavier University that prepares high school seniors in analytical reasoning, provides early exposure to science and health careers along with cultural and personal development experiences.

As part of the application process, a formal recommendation is required from two teachers in the program’s subject areas of Math, Science or English who can attest to the student’s academic performance and character.

Please complete and return this form to the address below on or before May 1st, 2015. Please note that the student’s application will not be reviewed until receipt of this form.

Xavier University of Louisiana
Office of Graduate Placement & University Summer Programs
1 Drexel Drive Box 37
New Orleans, LA 70125
summerprograms@xula.edu
Phone: (504) 520-5418 Fax: (504) 520-7921

<table>
<thead>
<tr>
<th>Your Observations/Knowledge Of:</th>
<th>(Please Check One)</th>
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<tbody>
<tr>
<td></td>
<td>Excellent</td>
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<tr>
<td>Discipline/Behavior in Class</td>
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<tr>
<td>Timely Completion of Assignments/Homework</td>
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<td>Class Participation</td>
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<td>Interest in Learning</td>
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<td>Ability to Work in Groups</td>
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<td>Character (Honesty, Attitude, Dependable, etc.)</td>
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<td>Social and Interpersonal Relationship with Peers</td>
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<td>Maturity</td>
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<td>Respect for Authority</td>
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</tbody>
</table>

Please provide any additional comments or explanations:

Teacher's Signature: ________________________________ Date: ________________
Xavier University of Louisiana
SOAR Summer Enrichment Program
Teacher Recommendation Form

Student Name: ______________________________

A. Is the student capable of conducting himself/herself in an orderly and courteous manner on a college campus where he/she will interact with a large number of diverse students?

☐ Yes ☐ No ☐ Unable to Access

B. Considering all attributes, I recommend the student:

☐ strongly ☐ as above average ☐ as average ☐ with reservation ☐ do not recommend

C. Please share any other information that you believe are pertinent and will help us to evaluate the student’s academic potential, ability to benefit from our program, and ability to learn. (PLEASE USE AN EXTRA PAGE IF NECESSARY)

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Teacher’s Signature: _______________________________ Date: ____________________