



Please return this form to: **Florida Southern College**  
**Attn: Office of Adult and Graduate Admission**  
**111 Lake Hollingsworth Drive**  
**Lakeland, FL 33801**

Applicant's Printed Name: \_\_\_\_\_  
First Middle Last

\_\_\_\_\_ I waive my right of access to confidential statements and recommendations which are contained in, or are a part of my education records in the possession of, or used by the Office of Adult and Graduate Admission. This waiver, which I understand I am not obligated to sign, can only be revoked in writing and only with respect to confidential statements and recommendations placed in my file subsequent to written revocation.

\_\_\_\_\_ I DO NOT waive my right to your recommendation

**(Applicant: please choose and initial the appropriate line ABOVE for the statement of your choice)**

Printed Name of Reference: \_\_\_\_\_

Applicant's Signed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Full Date of Birth or FSC ID # (required): \_\_\_\_\_

Dear \_\_\_\_\_, I would appreciate your recommendation to further my education at Florida Southern College. You may use this form or submit a personal letter. This recommendation will become a permanent part of my application file. Further, I understand the Family Educational Rights and Privacy Act of 1974, and in accordance with the law.

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**—Applicant is to complete the portion above this line—**

I. Please indicate the frequency of your current or previous interaction with the applicant:

Infrequent Monthly Weekly Daily

II. Place an obvious mark in the section that represents your estimate of the degree to which this applicant demonstrates each of the following qualities:

	Excels	Above Average	Average	Below Average	Poor	Unknown
Evidence of personal and professional goals						
Demonstrates willingness to learn and grow						
Ability to learn, understand, assimilate knowledge						
Ability to express self in writing						
Ability to express self orally						
Ability to organize responsibilities and tasks						
Reliability and promptness with assignments						
Punctuality and regularity in attendance						
Willingness to pursue tasks to completion						

	Excels	Above Average	Average	Below Average	Poor	Unknown
Ability to work independently						
Ability to work with people						
Degree of flexibility and ability to adapt						
Ability to accept evaluation of performance						
Handles stressful situations appropriately						

III. Please circle the words from the list that **BEST** describe the applicant. If you feel there are other words that should be included, please provide them in the blank space below:

- |  |                                      |                                       |                                       |
|--|--------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Outgoing      | <input type="checkbox"/> Inquisitive | <input type="checkbox"/> Concerned    | <input type="checkbox"/> Shy          |
| <input type="checkbox"/> Complacent    | <input type="checkbox"/> Mature      | <input type="checkbox"/> Well Groomed | <input type="checkbox"/> Tolerant     |
| <input type="checkbox"/> Cooperative   | <input type="checkbox"/> Quiet       | <input type="checkbox"/> Serious      | <input type="checkbox"/> Loyal        |
| <input type="checkbox"/> Cheerful      | <input type="checkbox"/> Dedicated   | <input type="checkbox"/> Follower     | <input type="checkbox"/> Competent    |
| <input type="checkbox"/> Thorough      | <input type="checkbox"/> Trustworthy | <input type="checkbox"/> Dependable   | <input type="checkbox"/> Enthusiastic |
| <input type="checkbox"/> Self-Centered | <input type="checkbox"/> Reserved    | <input type="checkbox"/> Sensitive    | <input type="checkbox"/> Inventive    |
| <input type="checkbox"/> Leader        | <input type="checkbox"/> Energetic   | <input type="checkbox"/> Friendly     | <input type="checkbox"/> Motivated    |
| <input type="checkbox"/> Confident     | <input type="checkbox"/> Creative    | <input type="checkbox"/> Aggressive   | <input type="checkbox"/> Congenial    |
| <input type="checkbox"/> Assertive     | <input type="checkbox"/> Probing     | <input type="checkbox"/> Initiator    | <input type="checkbox"/> Relaxed      |
| <input type="checkbox"/> Determined    | <input type="checkbox"/> _____       | <input type="checkbox"/> _____        | <input type="checkbox"/> _____        |

IV. Please include a statement about the applicant that you feel should be considered when we consider this student for admission to our program.

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Reference's Printed Name: \_\_\_\_\_

Reference's Signature: \_\_\_\_\_

Position and Company: \_\_\_\_\_

Email address (please print legibly): \_\_\_\_\_

Phone number: \_\_\_\_\_

To ensure your form is received promptly, please submit it via email to [evening@flsouthern.edu](mailto:evening@flsouthern.edu). If you have any questions, feel free to contact the Office of Adult and Graduate Admission at 863.680.4205. Thank you!