



## San Beda College Alabang

Don Manolo Blvd., Alabang Hills Village,  
Alabang 1770 Muntinlupa City  
Tel. No. 8809-7047; 8236-7222 loc. 1080  
Website: [www.sanbeda-alabang.edu.ph](http://www.sanbeda-alabang.edu.ph) ;  
email address: [admissions@sanbeda-alabang.edu.ph](mailto:admissions@sanbeda-alabang.edu.ph)  
**STUDENT ADMISSIONS and TESTING CENTER**

### SBCA STUDENT ACADEMIC and DISCIPLINE APPRAISAL FORM Graduate School

#### INSTRUCTIONS

**To the applicant:** Complete the information needed. Give this form to a former professor, guidance counselor of the institution from which you obtained your undergraduate degree, employer, parish priest, supervisor or any person of authority who knows you well enough to fill this form out in a manner that will assist the admissions committee.

**Complete Name:** \_\_\_\_\_  

Last Name
Given Name
Middle Name

**Present School and Address:** \_\_\_\_\_

**Level Applying for:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**To the person filling out this form:** The above applicant is seeking admission to the Graduate School of San Beda College Alabang. Please provide us with relevant information and honest evaluation about his/her potentials, capabilities, and traits which are helpful for graduate studies. Your appraisal of the applicant's intellectual capacities and moral fitness would be helpful in our screening process. Rest assured that all information will be held in confidence. After accomplishing the form, kindly email it to [admissions@sanbeda-alabang.edu.ph](mailto:admissions@sanbeda-alabang.edu.ph)

#### EVALUATION

Please rate the applicant on the qualities listed below	Excellent	Above Average	Average	Below Average	No Basis
<b>Intellectual Curiosity</b>					
<b>Integrity</b>					
<b>Knowledge of the Field</b>					
<b>Emotional Maturity</b>					
<b>Leadership Ability</b>					
<b>Potential for innovation in the field</b>					
<b>Social Consciousness</b>					
<b>Resiliency</b>					

How long have you known the applicant and in what capacity: \_\_\_\_\_

Please evaluate the applicant's overall strengths and potentials to perform in the graduate study. (Please tick one):  
 Exceptional     Superior     Above Average     Average     Fair     Poor

To your knowledge, has the applicant been involved in any crime, administrative or disciplinary proceedings?  
 ( ) YES ( ) NO. If yes, please indicate the nature of proceedings and involvement of applicants therein.

Please share your appraisal of the applicant's strengths and limitations, learning needs, physical condition and/or any circumstances that may give us added insight to the strengths and weaknesses of this applicant.

#### OVERALL RECOMMENDATION

<input type="checkbox"/>	Highly recommended FOR ADMISSION
<input type="checkbox"/>	Recommended for Admission
<input type="checkbox"/>	Not recommended for admission due to: _____

*Please do not leave this part blank*

**NAME:** \_\_\_\_\_ **SUBJECT/S TAUGHT:** \_\_\_\_\_  
**POSITION/ DESIGNATION:** \_\_\_\_\_ **CONTACT NUMBERS:** \_\_\_\_\_  
**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_