



**COLLEGE OF THE HOLY SPIRIT MANILA**

**GUIDANCE AND ADMISSIONS OFFICE**

163 E. Mendiola, Malacañang Complex

Manila, Philippines 1005

Tel. No. 735-6021

To the student: Fill out PART A only of this form. Then submit one form to your school principal, guidance counselor, and or class adviser/ subject teacher.

A. Name \_\_\_\_\_  
Last First Middle  
\_\_\_\_\_  
School School Address

B. Recommendation

To the school authority concerned: The Person names above is applying for the admission to the College of the Holy Spirit Manila. Please fill out the form completely and accurately for the proper appraisal of the student.

	Above Average	Average	Below Average	No chance to observe
Academic Performance				
Emotional Stability				
Social Relationship				
Moral Character				
Leadership				

Based on the entire graduating class, the applicant belongs to the (please check):

- ( ) Top ten ( ) Middle Third  
( ) Upper Third ( ) Lower Third

Overall Recommendation

- ( ) Strongly Recommendation ( ) Recommended with reservation  
( ) Recommended ( ) Not recommended

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Accomplished by: \_\_\_\_\_ Signature: \_\_\_\_\_

Designation: \_\_\_\_\_ Date: \_\_\_\_\_

*Note:*

*Upon completion of the appraisal, please return to the applicant in a sealed envelope with your signature across the seal.*