



A college preparatory high school for young women

**Admissions Office** 415-584-5929  
**Mercy High School San Francisco**  
 3250 Nineteenth Avenue  
 San Francisco, CA 94132  
[admissions@mercyhs.org](mailto:admissions@mercyhs.org)  
**FAX#: 415-334-9726**

**Confidential Recommendation Form**  
 To be completed by principal or counselor

Student's Name \_\_\_\_\_ has applied to Mercy High School.

Please FAX or mail both pages of this completed form to **Mercy High School** and retain a copy for your files.

**Academic Qualities**

	Excellent	Good	Average	Below Average
Study Habits				
Motivation				
Ability to Learn				
Oral Communication Skills				
Ability to Work Independently				
Ability to Work Cooperatively				
Intellectual Curiosity				
Attention Span				

The student is capable of succeeding in a college preparatory curriculum:  Yes  No

**Personal Qualities**

	Excellent	Good	Average	Below Average
Personal Conduct				
Self Confidence				
Leadership Potential				
Concern for Others				
Participation in the School Community				
Respect for Authority				
Creativity				
Respect Accorded by Her Peers				

**Parent Information**

(This information will not be used when evaluating the student.)

	Excellent	Good	Average	Below Average	N/A
Commitment of family to Catholic Education					
Support of family for school policies					
Regularity in meeting financial obligations					

Is the family currently receiving financial aid?  Yes  No  N/A (Continued next page)

STUDENT'S NAME (please print):

1. Please use the space below to state your supporting reasons on any of the academic and personal qualities marked on the reverse.

2. Should the admissions committee be aware of any factors that have had an impact on this student's academic or social progress to date?

3. Has the student been placed in any special school programs? (Gifted Student; Accelerated Classes; L.E.P.; Tutorial or Resource/Learning Specialist.)

4. Please comment on the student's disciplinary and attendance record at your school.

### Overall Recommendation

I strongly recommend this applicant	
I recommend this applicant	
I recommend this applicant with reservations	
I do not recommend this applicant	
Please call the school regarding this applicant and ask for	

Signature \_\_\_\_\_ Position \_\_\_\_\_

Print Name \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_ email: \_\_\_\_\_

This report will not be disclosed to the applicant; it will be available only to those involved in our admission decision process. It will be destroyed when no longer needed for admission purposes.

Mercy High School  
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San Francisco, CA 94132  
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