

# FACULTY EVALUATION



Student Name: \_\_\_\_\_  
Last First Middle

How long have you known the applicant and what courses has he/she taken with you?  
\_\_\_\_\_  
\_\_\_\_\_

Please briefly state your assessment of this student's academic strength, achievement and promise. Comment on his/her classroom performance, motivation, initiative and desire to succeed.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- I strongly recommend the admission of this applicant to Millikin University.
- I recommend this applicant.
- I recommend this applicant with reservations.
- I do not recommend this applicant for admission to Millikin University.

(Please make any additional comments that you feel would be helpful in assessing this applicant's case.)

Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_

\_\_\_\_\_ School Address \_\_\_\_\_

\_\_\_\_\_ Faculty Position Date Telephone \_\_\_\_\_

To the faculty: Federal legislation stipulates that this information will be open for review upon the student's request, provided admission to the University is granted; otherwise, it is confidential.

**Please mail this completed form to:  
Office of Admission, Millikin University, 1184 West Main Street, Decatur, IL 62522-2084**