## DE ANZA COLLEGE HONORS PROGRAM FACULTY RECOMMENDATION FORM

Name of applicant:				Date:	
The student named above is applying for admission to the De Anza College Honors Program. We are looking for students who have a commitment to learning and who are willing to take intellectual risks. Your recommendation can help determine if the student is able to be successful in the program. You may attach a separate letter if you wish.					
	Average	Above Average	Excellent	Outstanding (Top 5%)	<u>-</u>
Academic Personal Overall					
Academic/Intellectual Qual How would you describe this s particular, please comment ab	tudent's acaden				-
Personal Qualities What are the qualities that yo to your class, the school or th		t this student? Describe	the ways in whicl	n this student has contributed	
Additional Comments Any additional information about the student in regards to their Honors Program candidacy can be addressed in this section.					
Name					
Address					
Subject in Which You Instru			Prione		

Send completed letters of recommendation to dahonors@fhda.edu. If any questions arise, please contact the Honors Program by sending an email, calling 408-864-8833, or visiting the Honors Lounge in S-33b.