ETHEL WADDELL GITHII HONORS PROGRAM
SPELMAN COLLEGE
PROFESSOR RECOMMENDATION
Rising Sophomore

Applicant's Name_____
Last First Middle

Recommender's Name_____

To the Student

Please write your name and the name of the professor you wish to recommend you on this form. Deliver the form, along with an addressed envelope, to the professor. Address the envelope to Ethel Waddell Githii Honors Program Spelman College, 350 Spelman Lane, SW, Box 1395, Atlanta, Georgia 30314.

Signature _____ Date_____

To the Recommender

The student whose name appears above has been invited to apply for admission to the Ethel Waddell Githii Honors Program. As part of her application for the Honors Program, she is required to submit a written recommendation from a professor who has served as her instructor in an academic subject. Please answer the following questions. **Please return your recommendation in the envelope provided by April 24, 2020.**

Does this student attend class regularly? _____

Is this student punctual? _____

Does this student submit work in a timely fashion? _____

Does this student participate consistently? _____

Comments

_____

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_____

Signature_____Date_____