## Faculty Recommendation Experimental College

To the applicant: Please fill in the box below. The due date is the same as the due date for the application. The person completing the form should be a teacher of a course at Oberlin College.

ExCo Instructor's name:		
ExCo Course Title:		
Recommendation Due Date:		
To the faculty member: Please be as honest as possible; your comments will be kept confidential. Thank you for your time and assistance. After completion, please drop off this form at our office, Wilder 302, or send it to the ExCo Committee at Wilder Box 13, 135 W. Lorain St., Oberlin OH 44074. Please contact the ExCo Committee at exco@oberlin.edu or at 440-775-8096 if you have any questions.		
What has been your relationship to the applicant?		
Please comment on the applicant's potential as a teachinterpersonal skills, reliability and enthusiasm.	cher, in terms of leadership, communic	cation skills,
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		•
Additional comments:		
Signature:	Date:	_
Name (please print):		
Department:		
Department.		Revised 4/04