

EVALUATION FORM FOR UPPERCLASS APPLICANTS FROM BOARDING HOUSES AND PRIVATE DORMITORIES

Name:	Student No:
Course:	Year Level:
Boarding House Information	
Name of Boarding House:	Address:
Name of Landlord/Landlady:	
Contact Number:	Length of Stay:

Dear _____:

Mr./Ms. _____ is an applicant of _____ for the _____ semester of AY _____. May we request you to evaluate the said applicant by checking the appropriate boxes for each item.

Please be assured that we will treat the collected information with utmost confidentiality. Thank you very much for your cooperation.

Payment of Boarding House Fees: (Please rate according to TIMELINESS of payment with one (1) as the lowest and five (5) as the highest/on-time/early payment.) 1 2 3 4 5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Observance of Rules: (Please rate from 1-5, with one (1) as the lowest and five (5) as the highest.) 1 2 3 4 5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Character: (Please rate from 1-2.5, with (1) as lowest and (2.5) as the highest.) a) Respectful _____ b) Cooperative _____ c) Honest _____ d) Clean and Tidy _____
Other comments/ remarks: _____ _____

Signature Over Printed Name of Landlord/Landlady

Date

Note: Please return the duly filled up form in a sealed envelope through the applicant. Thank you.

