



RETURN TO: Office of Admissions
Albany College of Pharmacy
106 New Scotland Avenue
Albany, NY 12208-3492
Toll-free (888) 203-8010 Fax (518) 694-7322

COUNSELOR RECOMMENDATION

Please submit one counselor recommendation.

Applicant Information:

Name: _____

Address: _____

Guidance Counselor Information:

Name: _____

Position: _____

School Name: _____

School Address: _____

Phone: _____ E-mail: _____

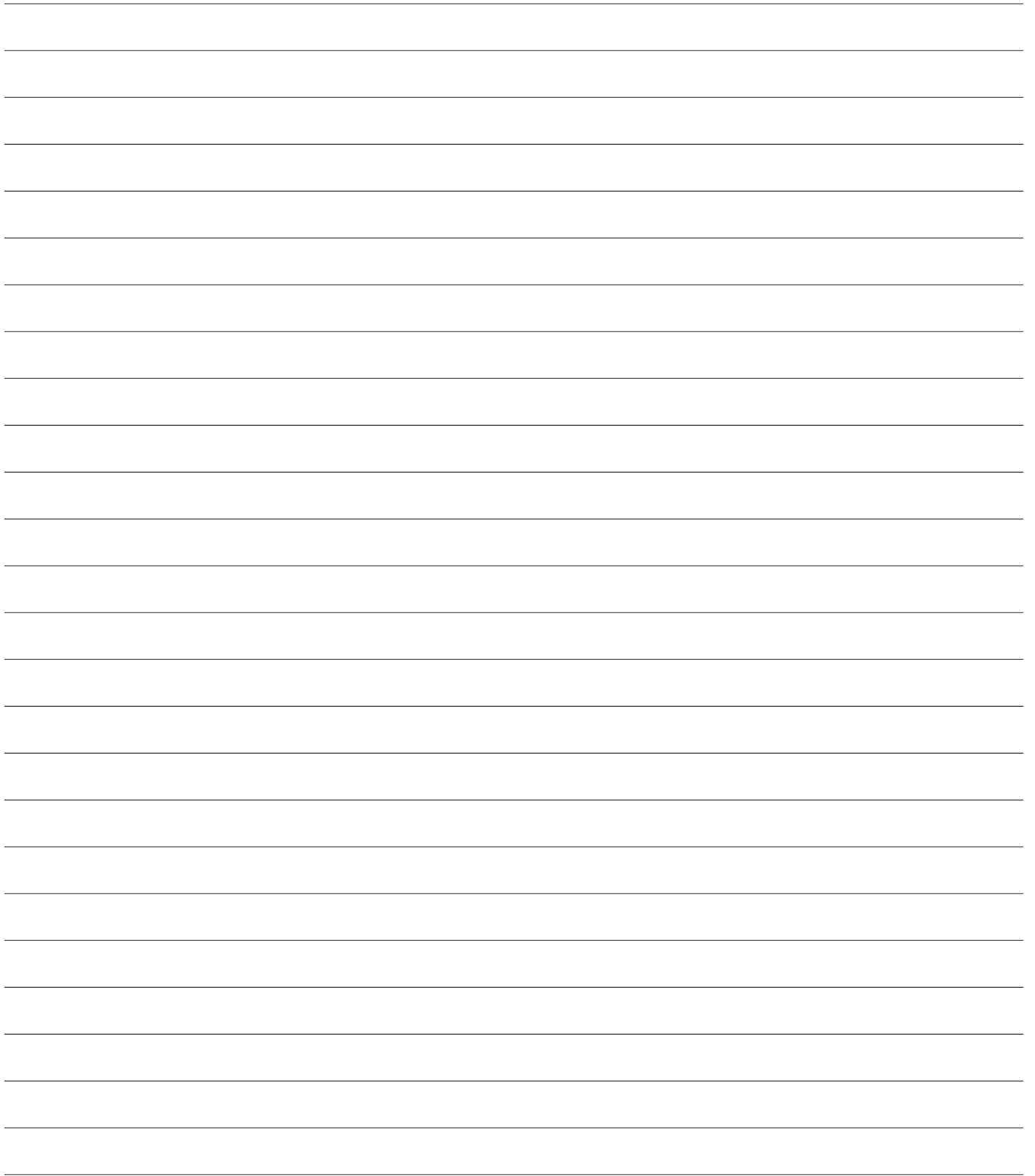
Signature

Date

Please check one box for each trait.

	Outstanding	Excellent	Good	Not Observed
Critical Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsible Use of Values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethical Principles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Learning Abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding of Basic Sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use the back of this form to provide any information that will help set this student apart from other applicants. You may attach additional pages if necessary.





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TEACHER RECOMMENDATION

Please submit one teacher recommendation from a mathematics or science teacher.

Applicant Information:

Name: _____

Address: _____

Teacher Information:

Name: _____

Position: _____

School Name: _____

School Address: _____

Phone: _____ E-mail: _____

Signature

Date

Please check one box for each trait.

	Outstanding	Excellent	Good	Not Observed
Critical Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsible Use of Values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethical Principles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Learning Abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding of Basic Sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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