MID-TERM REPORT

TO THE APPLICANT

After completing all the relevant questions below, give this form to instructors whose courses you are enrolled in at the time you file your application and ask them to provide a general indication of your performance, including your current grade and (if they wish) additional comments, and to sign and date the form. They should also provide the course title, number, and credits.

Legal Name _____
  *Last/Family/Sur (Enter name **exactly** as it appears on official documents.)   First/Given   Middle (complete)   Jr., etc.*

Birth Date _____ CAID (Common App ID) _____
                        mm/dd/yyyy

Address _____
  Number & Street   Apartment #   City/Town   State/Province   Country   ZIP/Postal Code

College or University you now attend _____ CEEB/ACT Code _____

IMPORTANT PRIVACY NOTICE: By signing this form, I authorize every school that I have attended to release all requested records and recommendations to colleges to which I am applying for admission. I also authorize employees at these colleges to confidentially contact my current and former schools should they have questions about the information submitted on my behalf.

○ I waive my right to review all recommendations and supporting documents submitted by me or on my behalf.

○ I DO NOT waive my right to review all recommendations and supporting documents submitted by me or on my behalf.
  • I have chosen not to waive my right to review my recommendations and supporting documents. I understand that my decision may lead my counselors or teachers to decline to write recommendations on my behalf. I also understand that my decision may lead colleges to disregard any recommendations submitted on my behalf.

I understand that my waiver or no waiver selection above pertains to all colleges to which I apply and that my selections cannot be changed after any recommendation or application submission.

Required Signature ✎ _____ Date _____

TO THE INSTRUCTOR

The Common Application membership finds it helpful to receive a general indication of how the student is performing in the courses he/she is currently enrolled in as they choose from among highly qualified candidates. **Be sure to sign below.**

Course Title/Department _____ Course Number _____ Credits _____

Current Grade _____ Comments *(Optional)* _____

Professor's Signature ✎ _____ Date _____

Course Title/Department _____ Course Number _____ Credits _____

Current Grade _____ Comments *(Optional)* _____

Professor's Signature ✎ _____ Date _____

Course Title/Department _____ Course Number _____ Credits _____

Current Grade _____ Comments *(Optional)* _____

Professor's Signature ✎ _____ Date _____

Course Title/Department _____ Course Number _____ Credits _____

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Course Title/Department _____ Course Number _____ Credits _____

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