



U.S. Coast Guard Academy

Math Instructor Evaluation

Director of Admissions (tp)
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Privacy Act Statement. In accordance with 5 USC 552a(e)(3), the following information is provided to you when supplying personal information to the USCG. (1) Authority which authorizes the solicitation of the information: 14 USC 182(a). (2) The Principal Purpose for this information is to ensure that the applicant is basically qualified to apply for the USCGA. (3) Routine uses which may be made of the info: As background info on applicants for the selection process. To contact the applicant. The SSN is a basic identifier. To determine if there are existing USCG records on the individual. In performance of the duties of officials and employees of the USCG, in managing and contributing to the admissions program and appointment of Cadets. (4) Disclosure of the information is voluntary, but the applicant will not be considered further if the information is not provided. Submissions of the Evaluator will not be disclosed to the applicant without consent.

Please provide the information requested in Section 1. On the front of a blank envelope, print the following four lines of information: (1) Your Name; (2) The last four digits of your SSN; (3) Math Instructor Evaluation; and (4) U.S. Coast Guard Academy. Provide this form and the envelope to your math instructor and request that the form be returned to you in the sealed envelope. This form must be returned to the Admissions Office, along with your other supplemental forms, by March 1st.

Section 1:

Name: _____ Last Four Digits of SSN: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Email: _____

Section 2: The above student is applying to the U.S. Coast Guard Academy. Please complete this form and seal it in the envelope provided by the applicant. Sign your name over the envelope seal to ensure confidentiality and return it to the student. On the back of this form or in a separate letter of recommendation, please discuss how well this student will: 1) Perform in a rigorous technical curriculum; and 2) Demonstrate respect and compassion toward others. Thank you for your time and assistance.

Did you stipulate confidentiality as a condition for providing information? (Please circle one)

Yes No

Do you have low, average, or high familiarity with this applicant? (Please circle one)

Low Average High

Table with 5 columns: Top 1%, Top 10%, Above Average, Average, Below Average, Not Observed

Please check the appropriate box:

Table with 12 rows of evaluation criteria and 5 columns of performance levels.

Name: _____ Title: _____

Signature: _____ Date: _____ Telephone: _____