**Form B-1.0: Personal Data**

***PLACE 2x2*** *photo*

*with white background here.*

|  |
| --- |
| **Name:** Last Name First Name Middle Name |
| **Nickname:**  | **Religion:** |
| **Age:** | **Sex:** | **Birth date:** (mm/dd/yyyy) |
| **Course and Major:**  |
| **Year Level:**  | **Year graduating from college:** |

**Current Organizational Affiliation** (This is the organization you are representing.)

|  |
| --- |
| **Name of Organization:** (Please spell-out acronyms.)  |
| **Position:**  |
| **How long have you been an officer/ student leader on campus?** (Please count only your involvement in college.) |

**Provincial/ Home Address and Contact Information**

|  |  |
| --- | --- |
| **House #, Street Name:** | **Barangay (or Village):** |
| **Town/ City:**  | **Province and Zip Code:** |
| **Landline:**  | **Mobile Number:** (Please indicate the number where you are sure to receive message.) |
| **E-mail Address:** (Please indicate the address where you are sure to receive message.) | **Facebook Account:**  |

**Family Data**

|  |  |
| --- | --- |
| **Father:** | **Occupation:** |
| **Mother:**  | **Occupation:** |
| **No. of Siblings:**  |

 I hereby certify upon my honor that all facts and information contained herein are true and accurate. Any misrepresentation shall automatically disqualify me from the search. Further, I agree that the organizers of the search have the sole prerogative to select the winners and that their decision is final and executory.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature over Printed Name Date Signed

**Form B-2.0: Academic Performance**

**Quality Point Index** (Per Semester)

|  |  |  |
| --- | --- | --- |
|  | **First Semester**  | **Second Semester** |
| **First Year** | *(e.g. 4.0)* |  |
| **Second Year** |  |  |
| **Third Year** |  |  |
| **Fourth Year** |  | *(no need to fill this part if you are fourth year in a 4-year course)* |
| **Fifth Year**(For 5-year courses) |  |  |

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*Please have this part signed by your College Dean/ Evaluator.*

***CERTIFICATION***

 *I certify to the best of my knowledge, that all information presented herein are true and accurate.*

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature over Printed Name Date Signed

**Form B-3.0: Summary of Leadership Positions Held**

List down a maximum of 8 organizations, groups, major programs or projects where you are/ were most actively involved as a leader during college. These can be university or community-based/ local, national or international in scope. If you are/ were handling more than one leadership position of the same organization or group, list them down as separate entries below. Do not include leadership positions of academic or subject/ class related activities (e.g. head of a thesis group) and non-leadership positions (e.g. member). List down information chronologically, starting from the most recent. Spell-out acronyms. No need to submit certifications/ support documents.

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Name of Organization/ Group/ Program/ Project**  | **Position/ Designation**  | **Duration** (State the month and year started; month and year ended.) |
| *Ex.* | *Liberal Arts College Student Council* | *Project Head, Coastal Clean-up Project* | *July 2014 to September 2014*  |
| 1. |  |  |  |
| 2.  |  |  |  |
| 3.  |  |  |  |
| 4.  |  |  |  |
| 5.  |  |  |  |
| 6.  |  |  |  |
| 7.  |  |  |  |
| 8.  |  |  |  |

*- - - Nothing Follows - - -*

**Form B-3.1: Most Significant Leadership Involvement**

Select a maximum of five (5) leadership positions from those you listed in Form B-3.0. Select only positions that benefit or have benefited others significantly. Fill-out one table of this form for each of the positions you have chosen. Do not leave any field blank.

**Part 1: Leadership Positions**

|  |
| --- |
| **Most Significant Leadership Position 1** |
| **Formal Title of the Leadership Position:**  | **Name of Organization:** (Please spell out acronyms.) |
| **Please describe/ summarize the mission/ purpose of the organization.** (2-3 sentences) |
| **Please summarize the leadership responsibilities of your position.** (In 1-3 sentences) |
| **Type of Organization:** (Check one.)□ Local Government □ Religious Organization□ Community-Based □ Extra-Curricular□ College Council/ Student Gov’t □ Academic/ Co-Curricular□ Formation Program □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Length of Time Involved in the Organization:** □ More than one year □ 5 months to one year □ 1-4 months □ Below one month  |
| **Size/ Population of the Organization:** (Please state the number of members.)□ Below 40 □ 40 to 79 □ 80 to 150 □ Above 150 | **Manner by which you obtained the position:**□ Election at Large □ Automatic/ Ex Officio □ Election by Board□ Appointed  |
| **Scope of the Organization:** (Check one.)□ Department Level □ Regional Level□ College Level □ Provincial Level□ University Level □ National Level□ Barangay/ Community □ International Level □ City Level  | **Responsibility Held/ Position:** (Check one.)□ President □ PRO□ Vice President □ Project/ Committee Head□ Secretary □ Legislator□ Treasurer □ Exec Com Member□ Auditor □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Most Significant Leadership Position 2** |
| **Formal Title of the Leadership Position:**  | **Name of Organization:** (Please spell out acronyms.) |
| **Please describe/ summarize the mission/ purpose of the organization.** (2-3 sentences) |
| **Please summarize the leadership responsibilities of your position.** (In 1-3 sentences) |
| **Type of Organization:** (Check one.)□ Local Government □ Religious Organization□ Community-Based □ Extra-Curricular□ College Council/ Student Gov’t □ Academic/ Co-Curricular□ Formation Program □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Length of Time Involved in the Organization:** □ More than one year □ 5 months to one year □ 1-4 months □ Below one month  |
| **Size/ Population of the Organization:** (Please state the number of members.)□ Below 40 □ 40 to 79 □ 80 to 150 □ Above 150 | **Manner by which you obtained the position:**□ Election at Large □ Automatic/ Ex Officio □ Election by Board□ Appointed  |
| **Scope of the Organization:** (Check one.)□ Department Level □ Regional Level□ College Level □ Provincial Level□ University Level □ National Level□ Barangay/ Community □ International Level □ City Level  | **Responsibility Held/ Position:** (Check one.)□ President □ PRO□ Vice President □ Project/ Committee Head□ Secretary □ Legislator□ Treasurer □ Exec Com Member□ Auditor □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Most Significant Leadership Position 3** |
| **Formal Title of the Leadership Position:**  | **Name of Organization:** (Please spell out acronyms.) |
| **Please describe/ summarize the mission/ purpose of the organization.** (2-3 sentences) |
| **Please summarize the leadership responsibilities of your position.** (In 1-3 sentences) |
| **Type of Organization:** (Check one.)□ Local Government □ Religious Organization□ Community-Based □ Extra-Curricular□ College Council/ Student Gov’t □ Academic/ Co-Curricular□ Formation Program □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Length of Time Involved in the Organization:** □ More than one year □ 5 months to one year □ 1-4 months □ Below one month  |
| **Size/ Population of the Organization:** (Please state the number of members.)□ Below 40 □ 40 to 79 □ 80 to 150 □ Above 150 | **Manner by which you obtained the position:**□ Election at Large □ Automatic/ Ex Officio □ Election by Board□ Appointed  |
| **Scope of the Organization:** (Check one.)□ Department Level □ Regional Level□ College Level □ Provincial Level□ University Level □ National Level□ Barangay/ Community □ International Level □ City Level  | **Responsibility Held/ Position:** (Check one.)□ President □ PRO□ Vice President □ Project/ Committee Head□ Secretary □ Legislator□ Treasurer □ Exec Com Member□ Auditor □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Most Significant Leadership Position 4** |
| **Formal Title of the Leadership Position:**  | **Name of Organization:** (Please spell out acronyms.) |
| **Please describe/ summarize the mission/ purpose of the organization.** (2-3 sentences) |
| **Please summarize the leadership responsibilities of your position.** (In 1-3 sentences) |
| **Type of Organization:** (Check one.)□ Local Government □ Religious Organization□ Community-Based □ Extra-Curricular□ College Council/ Student Gov’t □ Academic/ Co-Curricular□ Formation Program □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Length of Time Involved in the Organization:** □ More than one year □ 5 months to one year □ 1-4 months □ Below one month  |
| **Size/ Population of the Organization:** (Please state the number of members.)□ Below 40 □ 40 to 79 □ 80 to 150 □ Above 150 | **Manner by which you obtained the position:**□ Election at Large □ Automatic/ Ex Officio □ Election by Board□ Appointed  |
| **Scope of the Organization:** (Check one.)□ Department Level □ Regional Level□ College Level □ Provincial Level□ University Level □ National Level□ Barangay/ Community □ International Level □ City Level  | **Responsibility Held/ Position:** (Check one.)□ President □ PRO□ Vice President □ Project/ Committee Head□ Secretary □ Legislator□ Treasurer □ Exec Com Member□ Auditor □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Most Significant Leadership Position 5** |
| **Formal Title of the Leadership Position:**  | **Name of Organization:** (Please spell out acronyms.) |
| **Please describe/ summarize the mission/ purpose of the organization.** (2-3 sentences) |
| **Please summarize the leadership responsibilities of your position.** (In 1-3 sentences) |
| **Type of Organization:** (Check one.)□ Local Government □ Religious Organization□ Community-Based □ Extra-Curricular□ College Council/ Student Gov’t □ Academic/ Co-Curricular□ Formation Program □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Length of Time Involved in the Organization:** □ More than one year □ 5 months to one year □ 1-4 months □ Below one month  |
| **Size/ Population of the Organization:** (Please state the number of members.)□ Below 40 □ 40 to 79 □ 80 to 150 □ Above 150 | **Manner by which you obtained the position:**□ Election at Large □ Automatic/ Ex Officio □ Election by Board□ Appointed  |
| **Scope of the Organization:** (Check one.)□ Department Level □ Regional Level□ College Level □ Provincial Level□ University Level □ National Level□ Barangay/ Community □ International Level □ City Level  | **Responsibility Held/ Position:** (Check one.)□ President □ PRO□ Vice President □ Project/ Committee Head□ Secretary □ Legislator□ Treasurer □ Exec Com Member□ Auditor □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Part II. Leadership Impact**

|  |
| --- |
| **Given all the significant leadership positions you have listed in Part I, please describe completely but concisely all your significant contributions or accomplishments as a leader. State the specific actions you did as a leader, their results, and the outcomes of your leadership. Cite concrete examples to support your responses.** (Maximum 500 words) |

|  |
| --- |
| **FOR RRC MEMBERS/ PANELISTS** (Please do not fill this part.) |
|  **Who benefited from the nominee’s leadership?** (Check all that apply to this particular leadership position.)□ Members within the organization □ Entire University □ Entire College/ Department□ Members from other school-based organizations □ Community External to the University |
| **How do you assess the level of impact or positive difference that the nominee has made?**□ **HIGH:** Leadership was felt to a very large extent; very positive significant changes were achieved in the organization/ community  under his/ her leadership□ **ABOVE AVERAGE:** Leadership was felt to a large extent; significant positive changes were achieved in the organization/ community under his/ her leadership.□ **GOOD:** Leadership was felt to a good extent; some changes were achieved in the organization/ community under his/ her leadership.□ **FAIR:** Leadership was somewhat felt; conditions in my organization/ community remained largely unchanged under his/ her leadership.  |

**Form B-4.0: Summary of College Awards**

Identify a maximum of 5 individual or team awards you have received from Xavier University or other institutions beginning first year in college up to the present. **These awards should reflect your excellence, high achievement and dedication to a particular field of endeavor** – cognitive ability (e.g. quiz bee, debate, speaking); performing arts (e.g. theatre, music, dance); visual arts and creativity (e.g. painting, photography); sports and athletics; literary arts and journalism/ writing (e.g. poetry, essay, features); leadership and service (e.g. Most Outstanding Leader); award related to one’s field of study (e.g. Engineering Student of the Year). Please do not include academic awards (e.g. dean’s list), academic scholarships, pageant-based awards, awards given by your organization in XU, awards given to your organization, certificate of participation/ attendance to conferences or seminars and the like, except conferences/ congresses which involved rigorous screening process (e.g. Ayala Young Leaders Congress).

Please take note of the following distinction:

* Individual/ Personal Award – awards received as individual (e.g. Cheerleader of the Year)
* Team Awards – awards received as part of a winning group (e.g. Champion, 2014 Cheerleading Competition)

Please enclose support documents (e.g. photocopies of certificates, photos of plaques or medals, congratulatory letter, news clippings, etc).

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Award** | **Institution Who Conferred the Award** (If within Xavier University, please state the office.) | **Category**(Please state whether it is individual or team award.) | **Date Awarded** |
| *Ex. Cheerleader of the Year* | *Ignatius of Loyola Cup*  | *Individual*  | *September 2014* |
| *Ex. Champion, 15th National Cheerleading Competition for XU Cheer Squad* | *Ignatius of Loyola Cup* | *Team*  | *September 2014* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*- - - Nothing Follows - - -*

**Form B-4.1: Most Significant College Awards**

Fill out this form by accomplishing one table for each of the awards you have listed in Form B-4.0. Please spell out full name of the award. Do not leave any field blank/ unanswered.

|  |
| --- |
| **Most Significant College Award 1** |
| **Formal Name of Award:** | **Name of organization/ institution who conferred the award:** |
| **Award Category:** (Check one.)□ Team Award□ Individual Award  | **Description of the award:** (What is it all about?) |
| **At what level is the award given?** (Check one.)□ Department Level □ Barangay/ Community Level□ College Level □ Provincial/ Regional/ City Level□ University Level □ National/ International Level | **The award is equivalent to:** (Check one.)□ Champion/ First Place □ Runner Up□ Finalist/ 2nd Place □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Semi-Finalist/ 3rd Place |
| **How often is this award given out?** (Check one.)□ Every month □ Every semester □ Every year | **How many people can receive this award each time it is given out?**□ Only one □ 5 or less □ 6 -10 □ More than 10 |
| **What qualified you for this award?** | **The award is:** (check one)□ Co-Curricular□ Extra-Curricular  |
| □ Excellence in a particular field or subject□ Winning in a competition□ Outstanding leadership and service□ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ Honorary□ Nomination/ Competition□ Application  |
| **Describe the requirements and the selection process for this award including how many were considered for this award.** (Maximum: 150 words) |

|  |
| --- |
| **Most Significant College Award 2** |
| **Formal Name of Award:** | **Name of organization/ institution who conferred the award:** |
| **Award Category:** (Check one.)□ Team Award□ Individual Award  | **Description of the award:** (What is it all about?) |
| **At what level is the award given?** (Check one.)□ Department Level □ Barangay/ Community Level□ College Level □ Provincial/ Regional/ City Level□ University Level □ National/ International Level | **The award is equivalent to:** (Check one.)□ Champion/ First Place □ Runner Up□ Finalist/ 2nd Place □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Semi-Finalist/ 3rd Place |
| **How often is this award given out?** (Check one.)□ Every month □ Every semester □ Every year | **How many people can receive this award each time it is given out?**□ Only one □ 5 or less □ 6 -10 □ More than 10 |
| **What qualified you for this award?** | **The award is:** (check one)□ Co-Curricular□ Extra-Curricular  |
| □ Excellence in a particular field or subject□ Winning in a competition□ Outstanding leadership and service□ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ Honorary□ Nomination/ Competition□ Application  |
| **Describe the requirements and the selection process for this award including how many were considered for this award.** (Maximum: 150 words) |
| **Most Significant College Award 3** |
| **Formal Name of Award:** | **Name of organization/ institution who conferred the award:** |
| **Award Category:** (Check one.)□ Team Award□ Individual Award  | **Description of the award:** (What is it all about?) |
| **At what level is the award given?** (Check one.)□ Department Level □ Barangay/ Community Level□ College Level □ Provincial/ Regional/ City Level□ University Level □ National/ International Level | **The award is equivalent to:** (Check one.)□ Champion/ First Place □ Runner Up□ Finalist/ 2nd Place □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Semi-Finalist/ 3rd Place |
| **How often is this award given out?** (Check one.)□ Every month □ Every semester □ Every year | **How many people can receive this award each time it is given out?**□ Only one □ 5 or less □ 6 -10 □ More than 10 |
| **What qualified you for this award?** | **The award is:** (check one)□ Co-Curricular□ Extra-Curricular  |
| □ Excellence in a particular field or subject□ Winning in a competition□ Outstanding leadership and service□ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ Honorary□ Nomination/ Competition□ Application  |
| **Describe the requirements and the selection process for this award including how many were considered for this award.** (Maximum: 150 words) |

|  |
| --- |
| **Most Significant College Award 4** |
| **Formal Name of Award:** | **Name of organization/ institution who conferred the award:** |
| **Award Category:** (Check one.)□ Team Award□ Individual Award  | **Description of the award:** (What is it all about?) |
| **At what level is the award given?** (Check one.)□ Department Level □ Barangay/ Community Level□ College Level □ Provincial/ Regional/ City Level□ University Level □ National/ International Level | **The award is equivalent to:** (Check one.)□ Champion/ First Place □ Runner Up□ Finalist/ 2nd Place □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Semi-Finalist/ 3rd Place |
| **How often is this award given out?** (Check one.)□ Every month □ Every semester □ Every year | **How many people can receive this award each time it is given out?**□ Only one □ 5 or less □ 6 -10 □ More than 10 |
| **What qualified you for this award?** | **The award is:** (check one)□ Co-Curricular□ Extra-Curricular  |
| □ Excellence in a particular field or subject□ Winning in a competition□ Outstanding leadership and service□ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ Honorary□ Nomination/ Competition□ Application  |
| **Describe the requirements and the selection process for this award including how many were considered for this award.** (Maximum: 150 words) |

|  |
| --- |
| **Most Significant College Award 5** |
| **Formal Name of Award:** | **Name of organization/ institution who conferred the award:** |
| **Award Category:** (Check one.)□ Team Award□ Individual Award  | **Description of the award:** (What is it all about?) |
| **At what level is the award given?** (Check one.)□ Department Level □ Barangay/ Community Level□ College Level □ Provincial/ Regional/ City Level□ University Level □ National/ International Level | **The award is equivalent to:** (Check one.)□ Champion/ First Place □ Runner Up□ Finalist/ 2nd Place □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_□ Semi-Finalist/ 3rd Place |
| **How often is this award given out?** (Check one.)□ Every month □ Every semester □ Every year | **How many people can receive this award each time it is given out?**□ Only one □ 5 or less □ 6 -10 □ More than 10 |
| **What qualified you for this award?** | **The award is:** (check one)□ Co-Curricular□ Extra-Curricular  |
| □ Excellence in a particular field or subject□ Winning in a competition□ Outstanding leadership and service□ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | □ Honorary□ Nomination/ Competition□ Application  |
| **Describe the requirements and the selection process for this award including how many were considered for this award.** (Maximum: 150 words) |

**Form B-5.0: Summary of Most Significant**

**Community and Volunteer Involvement**

Select a maximum of five (5) most important and most significant community or volunteer involvement within the past 5 years. The involvement must benefit or have benefited a specific group or community within and outside the university. This may include event-based volunteer work (e.g. enrolment assistance, ORSEM, XUFD, Run for A Cause, and the like). Please do not include community work accomplished for an academic requirement (e.g. NSTP, Class Exposure Activity, and the like) and those you have listed in Form B-3.0. List down information chronologically, starting from the most recent. Do not leave any field blank. No need to submit certifications/ support documents.

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Name of organization/ community/ project you volunteered for** | **Position/ Designation**  | **Duration** (State the month and year started; month and year ended.) |
| *Ex.* | *Operation Tabang Sendong*  | *Member, Deployment Committee*  | *December 2011 to June 2012*  |
| 1. |  |  |  |
| 2.  |  |  |  |
| 3.  |  |  |  |
| 4.  |  |  |  |
| 5.  |  |  |  |

*- - - Nothing Follows - - -*

**Form B-5.1: Most Significant Community and Volunteer Involvement**

Fill out one table below for each of the involvements you have listed in Form B-5.0. Do not leave any field blank.

**Part 1: Community and Volunteer Involvement**

|  |
| --- |
| **Most Significant Community and Volunteer Involvement 1** |
| **Name of organization/ community/ project you volunteered for:**  |
| **Brief Description of the nature of the organization/ institution/ project/ program:** (2-5 sentences) |
| **Title of Position or Designation Held:** | **Duration:** (Start and End; moth and year) |
| **Briefly describe your involvement and the nature of your work.** (Maximum: 50 words) |
| **How often do you or did you do this volunteer work?** (Check one.)□ Daily □ 2-4 times a year□ 1-3 times a week □ Every year/ annually □ 1-3 times a month □ Only once/ one time activity  | **How long have you been rendering/ did you render this volunteer work?** (Check one.)□ 1-6 months □ 1-2 years □ 6 months to one year □ More than 2 years   |
| **Complete address of the organization/ institution:** |
| **Contact Person:** | **Affiliation:** | **Designation:** |
| **Mobile Number:** | **E-mail:**  | **Facebook:** (If any) |

|  |
| --- |
| **Most Significant Community and Volunteer Involvement 2** |
| **Name of organization/ community/ project you volunteered for:**  |
| **Brief Description of the nature of the organization/ institution/ project/ program:** (2-5 sentences) |
| **Title of Position or Designation Held:** | **Duration:** (Start and End; moth and year) |
| **Briefly describe your involvement and the nature of your work.** (Maximum: 50 words) |
| **How often do you or did you do this volunteer work?** (Check one.)□ Daily □ 2-4 times a year□ 1-3 times a week □ Every year/ annually □ 1-3 times a month □ Only once/ one time activity  | **How long have you been rendering/ did you render this volunteer work?** (Check one.)□ 1-6 months □ 1-2 years □ 6 months to one year □ More than 2 years   |
| **Complete address of the organization/ institution:** |
| **Contact Person:** | **Affiliation:** | **Designation:** |
| **Mobile Number:** | **E-mail:**  | **Facebook:** (If any) |

|  |
| --- |
| **Most Significant Community and Volunteer Involvement 3** |
| **Name of organization/ community/ project you volunteered for:**  |
| **Brief Description of the nature of the organization/ institution/ project/ program:** (2-5 sentences) |
| **Title of Position or Designation Held:** | **Duration:** (Start and End; moth and year) |
| **Briefly describe your involvement and the nature of your work.** (Maximum: 50 words) |
| **How often do you or did you do this volunteer work?** (Check one.)□ Daily □ 2-4 times a year□ 1-3 times a week □ Every year/ annually □ 1-3 times a month □ Only once/ one time activity  | **How long have you been rendering/ did you render this volunteer work?** (Check one.)□ 1-6 months □ 1-2 years □ 6 months to one year □ More than 2 years   |
| **Complete address of the organization/ institution:** |
| **Contact Person:** | **Affiliation:** | **Designation:** |
| **Mobile Number:** | **E-mail:**  | **Facebook:** (If any) |

|  |
| --- |
| **Most Significant Community and Volunteer Involvement 4** |
| **Name of organization/ community/ project you volunteered for:**  |
| **Brief Description of the nature of the organization/ institution/ project/ program:** (2-5 sentences) |
| **Title of Position or Designation Held:** | **Duration:** (Start and End; moth and year) |
| **Briefly describe your involvement and the nature of your work.** (Maximum: 50 words) |
| **How often do you or did you do this volunteer work?** (Check one.)□ Daily □ 2-4 times a year□ 1-3 times a week □ Every year/ annually □ 1-3 times a month □ Only once/ one time activity  | **How long have you been rendering/ did you render this volunteer work?** (Check one.)□ 1-6 months □ 1-2 years □ 6 months to one year □ More than 2 years   |
| **Complete address of the organization/ institution:** |
| **Contact Person:** | **Affiliation:** | **Designation:** |
| **Mobile Number:** | **E-mail:**  | **Facebook:** (If any) |

|  |
| --- |
| **Most Significant Community and Volunteer Involvement 5** |
| **Name of organization/ community/ project you volunteered for:**  |
| **Brief Description of the nature of the organization/ institution/ project/ program:** (2-5 sentences) |
| **Title of Position or Designation Held:** | **Duration:** (Start and End; moth and year) |
| **Briefly describe your involvement and the nature of your work.** (Maximum: 50 words) |
| **How often do you or did you do this volunteer work?** (Check one.)□ Daily □ 2-4 times a year□ 1-3 times a week □ Every year/ annually □ 1-3 times a month □ Only once/ one time activity  | **How long have you been rendering/ did you render this volunteer work?** (Check one.)□ 1-6 months □ 1-2 years □ 6 months to one year □ More than 2 years   |
| **Complete address of the organization/ institution:** |
| **Contact Person:** | **Affiliation:** | **Designation:** |
| **Mobile Number:** | **E-mail:**  | **Facebook:** (If any) |

**II. Volunteer Impact**

|  |
| --- |
| **Given all the community and volunteer involvement you have listed in Part I, please describe completely but concisely all your significant contributions or accomplishments as a leader. State the specific actions you did and the outcomes of your community and volunteer work. Cite concrete examples to support your responses.** (Maximum: 500 words) |

|  |
| --- |
| **FOR RRC MEMBERS/ PANELISTS** (Please do not fill this part.) |
|  **Who benefited from the nominee’s involvement?** (Check all that apply.)□ Members within the organization □ Entire University □ Entire College/ Department□ Members from other school-based organizations □ Community External to the University |
| **How do you assess the level of impact or positive difference that the nominee has made?**□ **HIGH:** Involvement was felt to a very large extent; very positive significant changes were achieved in the organization/ community  through them. □ **ABOVE AVERAGE:** Involvement was felt to a large extent; significant positive changes were achieved in the organization/ community through them.□ **GOOD:** Involvement was felt to a good extent; some changes were achieved in the organization/ community through them.□ **FAIR:** Involvement was somewhat felt; conditions in my organization/ community remained largely unchanged through them.  |

**Form B-6.1: Organization Moderator Assessment**

**To the Student Organization Moderator:**

You have been chosen to fill-out this form for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (nominee’s name), who is nominated for **AMDG Outstanding Student Leader Award (Magis Awards 2017).** We wish to ask your honest, candid, and objective assessment of the person’s strengths, weaknesses, and abilities. This will help us determine whether or not the nominee manifests, through concrete and tangible instances, the qualities that the AMDG Awardee should embody. Thank you very much for your time.

**PLEASE DO NOT ALLOW THE NOMINEE TO SEE THE CONTENTS OF YOUR ASSESSMENT.**

***Please return accomplished form to the nominee in a sealed long letter envelope, signed across the flap. On the envelope, please write the following: Name of Nominee, AMDG Outstanding Student Leader Award, Magis Awards 2017, Assessor’s Name and Assessor’s Affiliation.***

***What is AMDG Outstanding Student Leader Award?***

 *The AMDG Outstanding Student Leader Award is conferred on a student leader who embodies the spirit of “magis” in his/ her exercise of leadership. The AMDG awardee demonstrates Ignatian ideals of service and excellence and effectively steers his/ her organization towards achieving its vision and mission. On top of his/ her academic accomplishments, he/ she promotes holistic development to the members of his/ her organization and has made significant contribution to the community.*

|  |  |
| --- | --- |
| **Name of Assessor:** | **Department/ Organization:** |
| **Designation:** | **Mobile Number:**  | **E-mail Address:** |
| **Name of organization in which you serve (d) as mentor/ adviser to the nominee:** (Please spell out acronym.) |
| **Number of years as mentor/ adviser:**   | **How long have you known the nominee?** |

**PART 1: QUANTITATIVE ASSESSMENT**

Please give your ratings based on how well you know the nominee. Check the field corresponding to the following leadership indicator:

1 = not evident, 5 = very evident.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A. Self Awareness** | **1** | **2** | **3** | **4** | **5** |
| S/he has realistic recognition and appreciation of personal strengths, limitations, moods, emotions, and motivation/ drives.  |  |  |  |  |  |
| S/he has clear knowledge of personal values and principles and strives to live by these accordingly.  |  |  |  |  |  |
| S/he acknowledges weaknesses and limitations and takes steps to improve them.  |  |  |  |  |  |
| **B. Leadership** |
| S/he is motivated by a genuine desire to work and serve for reasons that go beyond ego, positions of leadership, status, etc.  |  |  |  |  |  |
| S/he is capable of eliciting the support and confidence of others in the attainment of task objectives.  |  |  |  |  |  |
| S/he has the ability to work harmoniously with co-leaders and co-members in accomplishing a given task.  |  |  |  |  |  |
| S/he shows willingness to be involved in the growth and development of other people. |  |  |  |  |  |
| S/he sets a clear vision for the organization and directs the organization towards the attainment of its vision and mission. |  |  |  |  |  |
| **C. Social Responsibility** |
| S/he has a strong desire to serve others as concretized in his/ her school and community involvement.  |  |  |  |  |  |
| S/he has keen awareness of the issues, problems, and concerns of his/ her community.  |  |  |  |  |  |
| S/he has a vision for his/ her identified community and has taken concrete steps toward this vision.  |  |  |  |  |  |
| S/he has a healthy dissatisfaction with the status quo and shows desire to bring about meaningful/ positive change.  |  |  |  |  |  |

**PART 2: QUALITATIVE ASSESSMENT**

Please write down your honest, candid, and objective assessment of the nominee’s leadership qualities, personal strengths, weaknesses, and leadership impact on the space provided below. Cite concrete examples, experiences, instances, and specific changes or improvements that the nominee has made to support your assessment. (Maximum: 200 words)

**Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Signature of Assessor:** | **Date Signed:**  |

**Form B-6.2: Mentor/ Adviser Assessment 1**

**To the mentor/ adviser assessor:**

You have been chosen to fill-out this form for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (nominee’s name), who is nominated for **AMDG Outstanding Student Leader Award (Magis Awards 2017).** We wish to ask your honest, candid, and objective assessment of the person’s strengths, weaknesses, and abilities. This will help us determine whether or not the nominee manifests, through concrete and tangible instances, the qualities that the AMDG Awardee should embody. Thank you very much for your time.

**PLEASE DO NOT ALLOW THE NOMINEE TO SEE THE CONTENTS OF YOUR ASSESSMENT.**

***Please return accomplished form to the nominee in a sealed long letter envelope, signed across the flap. On the envelope, please write the following: Name of Nominee, AMDG Outstanding Student Leader Award, Magis Awards 2017, Assessor’s Name and Assessor’s Affiliation.***

***What is AMDG Outstanding Student Leader Award?***

 *The AMDG Outstanding Student Leader Award is conferred on a student leader who embodies the spirit of “magis” in his/ her exercise of leadership. The AMDG awardee demonstrates Ignatian ideals of service and excellence and effectively steers his/ her organization towards achieving its vision and mission. On top of his/ her academic accomplishments, he/ she promotes holistic development to the members of his/ her organization and has made significant contribution to the community.*

|  |  |
| --- | --- |
| **Name of Assessor:** | **Department/ Organization:** |
| **Designation:** | **Mobile Number:**  | **E-mail Address:** |
| **Name of organization in which you serve(d) as mentor/ adviser to the nominee:** (Please spell out acronym.) |
| **Number of years as mentor/ adviser:**   | **How long have you known the nominee?** |

**PART 1: QUANTITATIVE ASSESSMENT**

Please give your ratings based on how well you know the nominee. Check the field corresponding to the following leadership indicator:

1 = not evident, 5 = very evident.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A. Self Awareness**  | **1** | **2** | **3** | **4** | **5** |
| S/he has realistic recognition and appreciation of personal strengths, limitations, moods, emotions, and motivation/ drives.  |  |  |  |  |  |
| S/he has clear knowledge of personal values and principles and strives to live by these accordingly.  |  |  |  |  |  |
| S/he acknowledges weaknesses and limitations and takes steps to improve them.  |  |  |  |  |  |
| **B. Leadership** |
| S/he is motivated by a genuine desire to work and serve for reasons that go beyond ego, positions of leadership, status, etc.  |  |  |  |  |  |
| S/he is capable of eliciting the support and confidence of others in the attainment of task objectives.  |  |  |  |  |  |
| S/he has the ability to work harmoniously with co-leaders and co-members in accomplishing a given task.  |  |  |  |  |  |
| S/he shows willingness to be involved in the growth and development of other people. |  |  |  |  |  |
| S/he sets a clear vision for the organization and directs the organization towards the attainment of its vision and mission. |  |  |  |  |  |
| **C. Social Responsibility** |
| S/he has a strong desire to serve others as concretized in his/ her school and community involvement.  |  |  |  |  |  |
| S/he has keen awareness of the issues, problems, and concerns of his/ her community.  |  |  |  |  |  |
| S/he has a vision for his/ her identified community and has taken concrete steps toward this vision.  |  |  |  |  |  |
| S/he has a healthy dissatisfaction with the status quo and shows desire to bring about meaningful/ positive change.  |  |  |  |  |  |

**PART 2: QUALITATIVE ASSESSMENT**

Please write down your honest, candid, and objective assessment of the nominee’s leadership qualities, personal strengths, weaknesses, and leadership impact on the space provided below. Cite concrete examples, experiences, instances, and specific changes or improvements that the nominee has made to support your assessment. (Maximum: 200 words)

**Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Signature of Assessor:** | **Date Signed:**  |

**Form B-6.3: Mentor/ Adviser Assessment 2**

**To the mentor/ adviser assessor:**

You have been chosen to fill-out this form for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (nominee’s name), who is nominated for **AMDG Outstanding Student Leader Award (Magis Awards 2017).** We wish to ask your honest, candid, and objective assessment of the person’s strengths, weaknesses, and abilities. This will help us determine whether or not the nominee manifests, through concrete and tangible instances, the qualities that the AMDG Awardee should embody. Thank you very much for your time.

**PLEASE DO NOT ALLOW THE NOMINEE TO SEE THE CONTENTS OF YOUR ASSESSMENT.**

***Please return accomplished form to the nominee in a sealed long letter envelope, signed across the flap. On the envelope, please write the following: Name of Nominee, AMDG Outstanding Student Leader Award, Magis Awards 2017, Assessor’s Name and Assessor’s Affiliation.***

***What is AMDG Outstanding Student Leader Award?***

 *The AMDG Outstanding Student Leader Award is conferred on a student leader who embodies the spirit of “magis” in his/ her exercise of leadership. The AMDG awardee demonstrates Ignatian ideals of service and excellence and effectively steers his/ her organization towards achieving its vision and mission. On top of his/ her academic accomplishments, he/ she promotes holistic development to the members of his/ her organization and has made significant contribution to the community.*

|  |  |
| --- | --- |
| **Name of Assessor:** | **Department/ Organization:** |
| **Designation:** | **Mobile Number:**  | **E-mail Address:** |
| **Name of organization in which you serve(d) as mentor/ adviser to the nominee:** (Please spell out acronym.) |
| **Number of years as mentor/ adviser:**   | **How long have you known the nominee?** |

**PART 1: QUANTITATIVE ASSESSMENT**

Please give your ratings based on how well you know the nominee. Check the field corresponding to the following leadership indicator:

1 = not evident, 5 = very evident.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A. Self Awareness**  | **1** | **2** | **3** | **4** | **5** |
| S/he has realistic recognition and appreciation of personal strengths, limitations, moods, emotions, and motivation/ drives.  |  |  |  |  |  |
| S/he has clear knowledge of personal values and principles and strives to live by these accordingly.  |  |  |  |  |  |
| S/he acknowledges weaknesses and limitations and takes steps to improve them.  |  |  |  |  |  |
| **B. Leadership** |
| S/he is motivated by a genuine desire to work and serve for reasons that go beyond ego, positions of leadership, status, etc.  |  |  |  |  |  |
| S/he is capable of eliciting the support and confidence of others in the attainment of task objectives.  |  |  |  |  |  |
| S/he has the ability to work harmoniously with co-leaders and co-members in accomplishing a given task.  |  |  |  |  |  |
| S/he shows willingness to be involved in the growth and development of other people. |  |  |  |  |  |
| S/he sets a clear vision for the organization and directs the organization towards the attainment of its vision and mission. |  |  |  |  |  |
| **C. Social Responsibility** |
| S/he has a strong desire to serve others as concretized in his/ her school and community involvement.  |  |  |  |  |  |
| S/he has keen awareness of the issues, problems, and concerns of his/ her community.  |  |  |  |  |  |
| S/he has a vision for his/ her identified community and has taken concrete steps toward this vision.  |  |  |  |  |  |
| S/he has a healthy dissatisfaction with the status quo and shows desire to bring about meaningful/ positive change.  |  |  |  |  |  |

**PART 2: QUALITATIVE ASSESSMENT**

Please write down your honest, candid, and objective assessment of the nominee’s leadership qualities, personal strengths, weaknesses, and leadership impact on the space provided below. Cite concrete examples, experiences, instances, and specific changes or improvements that the nominee has made to support your assessment. (Maximum: 200 words)

**Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Signature of Assessor:** | **Date Signed:**  |

**Form B-7.1: Colleague Assessment 1 (Co-Officer)**

**To the colleague assessor:**

You have been chosen to fill-out this form for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (nominee’s name), who is nominated for **AMDG Outstanding Student Leader Award (Magis Awards 2017).** We wish to ask your honest, candid, and objective assessment of the person’s strengths, weaknesses, and abilities. This will help us determine whether or not the nominee manifests, through concrete and tangible instances, the qualities that the AMDG Awardee should embody. Thank you very much for your time.

**PLEASE DO NOT ALLOW THE NOMINEE TO SEE THE CONTENTS OF YOUR ASSESSMENT.**

***Please return accomplished form to the nominee in a sealed long letter envelope, signed across the flap. On the envelope, please write the following: Name of Nominee, AMDG Outstanding Student Leader Award, Magis Awards 2017, Assessor’s Name and Assessor’s Affiliation.***

***What is AMDG Outstanding Student Leader Award?***

 *The AMDG Outstanding Student Leader Award is conferred on a student leader who embodies the spirit of “magis” in his/ her exercise of leadership. The AMDG awardee demonstrates Ignatian ideals of service and excellence and effectively steers his/ her organization towards achieving its vision and mission. On top of his/ her academic accomplishments, he/ she promotes holistic development to the members of his/ her organization and has made significant contribution to the community.*

|  |  |
| --- | --- |
| **Name of Assessor:** | **Department/ Organization:** |
| **Designation:** | **Mobile Number:**  | **E-mail Address:** |
| **Name of organization in which you serve(d) as mentor/ adviser to the nominee:** (Please spell out acronym.) |
| **Number of years as mentor/ adviser:**   | **How long have you known the nominee?** |

**PART 1: QUANTITATIVE ASSESSMENT**

Please give your ratings based on how well you know the nominee. Check the field corresponding to the following leadership indicator:

1 = not evident, 5 = very evident.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A. Self Awareness**  | **1** | **2** | **3** | **4** | **5** |
| S/he has realistic recognition and appreciation of personal strengths, limitations, moods, emotions, and motivation/ drives.  |  |  |  |  |  |
| S/he has clear knowledge of personal values and principles and strives to live by these accordingly.  |  |  |  |  |  |
| S/he acknowledges weaknesses and limitations and takes steps to improve them.  |  |  |  |  |  |
| **B. Leadership** |
| S/he is motivated by a genuine desire to work and serve for reasons that go beyond ego, positions of leadership, status, etc.  |  |  |  |  |  |
| S/he is capable of eliciting the support and confidence of others in the attainment of task objectives.  |  |  |  |  |  |
| S/he has the ability to work harmoniously with co-leaders and co-members in accomplishing a given task.  |  |  |  |  |  |
| S/he shows willingness to be involved in the growth and development of other people. |  |  |  |  |  |
| S/he sets a clear vision for the organization and directs the organization towards the attainment of its vision and mission. |  |  |  |  |  |
| **C. Social Responsibility** |
| S/he has a strong desire to serve others as concretized in his/ her school and community involvement.  |  |  |  |  |  |
| S/he has keen awareness of the issues, problems, and concerns of his/ her community.  |  |  |  |  |  |
| S/he has a vision for his/ her identified community and has taken concrete steps toward this vision.  |  |  |  |  |  |
| S/he has a healthy dissatisfaction with the status quo and shows desire to bring about meaningful/ positive change.  |  |  |  |  |  |

**PART 2: QUALITATIVE ASSESSMENT**

Please write down your honest, candid, and objective assessment of the nominee’s leadership qualities, personal strengths, weaknesses, and leadership impact on the space provided below. Cite concrete examples, experiences, instances, and specific changes or improvements that the nominee has made to support your assessment. (Maximum: 200 words)

**Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Signature of Assessor:** | **Date Signed:**  |

**Form B-7.2: Colleague Assessment 2 (Organization Member)**

**To the colleague assessor:**

You have been chosen to fill-out this form for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (nominee’s name), who is nominated for **AMDG Outstanding Student Leader Award (Magis Awards 2017).** We wish to ask your honest, candid, and objective assessment of the person’s strengths, weaknesses, and abilities. This will help us determine whether or not the nominee manifests, through concrete and tangible instances, the qualities that the AMDG Awardee should embody. Thank you very much for your time.

**PLEASE DO NOT ALLOW THE NOMINEE TO SEE THE CONTENTS OF YOUR ASSESSMENT.**

***Please return accomplished form to the nominee in a sealed long letter envelope, signed across the flap. On the envelope, please write the following: Name of Nominee, AMDG Outstanding Student Leader Award, Magis Awards 2017, Assessor’s Name and Assessor’s Affiliation.***

***What is AMDG Outstanding Student Leader Award?***

 *The AMDG Outstanding Student Leader Award is conferred on a student leader who embodies the spirit of “magis” in his/ her exercise of leadership. The AMDG awardee demonstrates Ignatian ideals of service and excellence and effectively steers his/ her organization towards achieving its vision and mission. On top of his/ her academic accomplishments, he/ she promotes holistic development to the members of his/ her organization and has made significant contribution to the community.*

|  |  |
| --- | --- |
| **Name of Assessor:** | **Department/ Organization:** |
| **Designation:** | **Mobile Number:**  | **E-mail Address:** |
| **Name of organization in which you serve(d) as mentor/ adviser to the nominee:** (Please spell out acronym.) |
| **Number of years as mentor/ adviser:**   | **How long have you known the nominee?** |

**PART 1: QUANTITATIVE ASSESSMENT**

Please give your ratings based on how well you know the nominee. Check the field corresponding to the following leadership indicator:

1 = not evident, 5 = very evident.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A. Self Awareness**  | **1** | **2** | **3** | **4** | **5** |
| S/he has realistic recognition and appreciation of personal strengths, limitations, moods, emotions, and motivation/ drives.  |  |  |  |  |  |
| S/he has clear knowledge of personal values and principles and strives to live by these accordingly.  |  |  |  |  |  |
| S/he acknowledges weaknesses and limitations and takes steps to improve them.  |  |  |  |  |  |
| **B. Leadership** |
| S/he is motivated by a genuine desire to work and serve for reasons that go beyond ego, positions of leadership, status, etc.  |  |  |  |  |  |
| S/he is capable of eliciting the support and confidence of others in the attainment of task objectives.  |  |  |  |  |  |
| S/he has the ability to work harmoniously with co-leaders and co-members in accomplishing a given task.  |  |  |  |  |  |
| S/he shows willingness to be involved in the growth and development of other people. |  |  |  |  |  |
| S/he sets a clear vision for the organization and directs the organization towards the attainment of its vision and mission. |  |  |  |  |  |
| **C. Social Responsibility** |
| S/he has a strong desire to serve others as concretized in his/ her school and community involvement.  |  |  |  |  |  |
| S/he has keen awareness of the issues, problems, and concerns of his/ her community.  |  |  |  |  |  |
| S/he has a vision for his/ her identified community and has taken concrete steps toward this vision.  |  |  |  |  |  |
| S/he has a healthy dissatisfaction with the status quo and shows desire to bring about meaningful/ positive change.  |  |  |  |  |  |

**PART 2: QUALITATIVE ASSESSMENT**

Please write down your honest, candid, and objective assessment of the nominee’s leadership qualities, personal strengths, weaknesses, and leadership impact on the space provided below. Cite concrete examples, experiences, instances, and specific changes or improvements that the nominee has made to support your assessment. (Maximum: 200 words)

**Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Signature of Assessor:** | **Date Signed:**  |

**Form B-7.3: Colleague Assessment 3 (Organization Member)**

**To the colleague assessor:**

You have been chosen to fill-out this form for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (nominee’s name), who is nominated for **AMDG Outstanding Student Leader Award (Magis Awards 2017).** We wish to ask your honest, candid, and objective assessment of the person’s strengths, weaknesses, and abilities. This will help us determine whether or not the nominee manifests, through concrete and tangible instances, the qualities that the AMDG Awardee should embody. Thank you very much for your time.

**PLEASE DO NOT ALLOW THE NOMINEE TO SEE THE CONTENTS OF YOUR ASSESSMENT.**

***Please return accomplished form to the nominee in a sealed long letter envelope, signed across the flap. On the envelope, please write the following: Name of Nominee, AMDG Outstanding Student Leader Award, Magis Awards 2017, Assessor’s Name and Assessor’s Affiliation.***

***What is AMDG Outstanding Student Leader Award?***

 *The AMDG Outstanding Student Leader Award is conferred on a student leader who embodies the spirit of “magis” in his/ her exercise of leadership. The AMDG awardee demonstrates Ignatian ideals of service and excellence and effectively steers his/ her organization towards achieving its vision and mission. On top of his/ her academic accomplishments, he/ she promotes holistic development to the members of his/ her organization and has made significant contribution to the community.*

|  |  |
| --- | --- |
| **Name of Assessor:** | **Department/ Organization:** |
| **Designation:** | **Mobile Number:**  | **E-mail Address:** |
| **Name of organization in which you serve(d) as mentor/ adviser to the nominee:** (Please spell out acronym.) |
| **Number of years as mentor/ adviser:**   | **How long have you known the nominee?** |

**PART 1: QUANTITATIVE ASSESSMENT**

Please give your ratings based on how well you know the nominee. Check the field corresponding to the following leadership indicator:

1 = not evident, 5 = very evident.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **A. Self Awareness**  | **1** | **2** | **3** | **4** | **5** |
| S/he has realistic recognition and appreciation of personal strengths, limitations, moods, emotions, and motivation/ drives.  |  |  |  |  |  |
| S/he has clear knowledge of personal values and principles and strives to live by these accordingly.  |  |  |  |  |  |
| S/he acknowledges weaknesses and limitations and takes steps to improve them.  |  |  |  |  |  |
| **B. Leadership** |
| S/he is motivated by a genuine desire to work and serve for reasons that go beyond ego, positions of leadership, status, etc.  |  |  |  |  |  |
| S/he is capable of eliciting the support and confidence of others in the attainment of task objectives.  |  |  |  |  |  |
| S/he has the ability to work harmoniously with co-leaders and co-members in accomplishing a given task.  |  |  |  |  |  |
| S/he shows willingness to be involved in the growth and development of other people. |  |  |  |  |  |
| S/he sets a clear vision for the organization and directs the organization towards the attainment of its vision and mission. |  |  |  |  |  |
| **C. Social Responsibility** |
| S/he has a strong desire to serve others as concretized in his/ her school and community involvement.  |  |  |  |  |  |
| S/he has keen awareness of the issues, problems, and concerns of his/ her community.  |  |  |  |  |  |
| S/he has a vision for his/ her identified community and has taken concrete steps toward this vision.  |  |  |  |  |  |
| S/he has a healthy dissatisfaction with the status quo and shows desire to bring about meaningful/ positive change.  |  |  |  |  |  |

**PART 2: QUALITATIVE ASSESSMENT**

Please write down your honest, candid, and objective assessment of the nominee’s leadership qualities, personal strengths, weaknesses, and leadership impact on the space provided below. Cite concrete examples, experiences, instances, and specific changes or improvements that the nominee has made to support your assessment. (Maximum: 200 words)

**Name of Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Signature of Assessor:** | **Date Signed:**  |