

Dr. Walter Breau, Ph.D.  
Vice President of Academic Affairs  
College of Our Lady of the Elms  
291 Springfield Street  
Chicopee, MA 01013

Dear Dr. Breau,

I would like to recommend \_\_\_\_\_ as a candidate for the Elms College  
Dual Enrollment Program during the \_\_\_\_\_ semester.  
Academic Term

This candidate meets all the requisites for Dual Enrollment courses in:

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

at the secondary level and is, therefore, eligible to participate in this cooperative program.

This student has demonstrated academic excellence in the above-mentioned areas during his/her tenure at this school and has earned the full support of the faculty and administration in this pursuit.

Sincerely,

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guidance Counselor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher/Advisor

\_\_\_\_\_  
Date