Teacher Recommendation Student Questionnaire

Name	
Date submitted	Counselor's name
	ve a teacher at least two (2) weeks to complete a letter of additional forms prior to any deadline
1. What course(s) have	you taken with me?
2. What grade(s) did yo	ou receive?
3. What do you feel we	ere your strengths in this course?
4. What do you feel we them?	re your areas of weakness and how did you overcome
5. Describe a project or you	paper completed for this course that is memorable to
6. What is your intende	ed college major?
7. What should I empha	asize about you in my class