

LETTER OF RECOMMENDATION REQUEST FORM

NAME: _____ STUDENT ID#: _____

EMAIL: _____ CELL PHONE: _____

COUNSELOR: _____

Instructions to writer: _____ Common App, SENDedu, or other online application

_____ Please mail the letter to the following address:

GPA _____ Rank _____ ACT Score _____ SAT score _____ AP Scores _____

Pre-AP classes taken:

AP Classes taken(taking)

Classes toward career interest:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

School Activities and Athletics you have participated in (please include any offices held, varsity, etc.):

Activities and Community Service you have participated in outside of school:

1. My family background is (i.e. are you the 1st to attend college)... _____

2. My goals are... _____

These goals are important to be because... _____

3. The out of school activity that has been the most rewarding to me is... _____

4. My special talents are... _____

5. The accomplishments that I am most proud of are... _____

6. The things I do for fun and relaxation are... _____

7. My greatest strength is... _____
My greatest weakness is... _____

8. One of my fondest memories is... _____

9. The five (5) adjectives that best describe me are:

- | | |
|----------|----------|
| 1) _____ | 4) _____ |
| 2) _____ | 5) _____ |
| 3) _____ | |

10. Please rate yourself in each of the following areas (5 highest to 1 lowest)

- | | |
|--------------------------|-------------------------------|
| _____ Initiative | _____ Intellect |
| _____ Curiosity | _____ Self-Motivation |
| _____ Responsibility | _____ Leadership |
| _____ Creativity | _____ Confidence |
| _____ Sense of humor | _____ Compassion |
| _____ Honesty | _____ Persistence |
| _____ Risk taker | _____ Tolerant of differences |
| _____ Self-awareness | _____ Perceptive |
| _____ Maturity | _____ Energy |
| _____ Written Expression | _____ Oral Expression |
| _____ Healthy | _____ Competitive |
| _____ Cooperative | _____ Dependable |
| _____ Team Player | _____ Listener |

11. Please write if there are any extenuating circumstances or any additional information the writer of your letter needs to be aware of. _____

*******MAKE COPIES FOR YOUR FILE FOR FUTURE REQUESTS*******

**REQUEST A LETTER AT LEAST THREE WEEKS BEFORE IT IS REQUIRED.
DON'T FORGET TO THANK YOUR RECOMMENDER.**

I GIVE MY PERMISSION TO RELEASE THIS INFORMATION SO THAT A LETTER OF RECOMMENDATION MAY BE WRITTEN. I UNDERSTAND THAT I WILL NOT RECEIVE A COPY OF THE LETTER, AND IT WILL BE SENT DIRECTLY TO MY COLLEGE/SCHOLARSHIP:

Student Signature: _____ Date: _____