



# Fargo South High School

## Letter of Recommendation Form

If you need a letter of recommendation for a college application, a scholarship, or other reason, please complete this form and include as much information as possible. Please be completed and accurate in the information you provide and allow a minimum of two weeks to receive a letter of recommendation.

Remember that the person writing your recommendation wants to do a good job for you.

GENERAL INFORMATION						
NAME					DATE	
ADDRESS					PHONE	
REFERENCE INFORMATION						
NAME OF TEACHER/ADVISOR FOR RECOMMENDATION			SCHOOL/SCHOLARSHIP APPLYING FOR			
SCHOOL ACTIVITIES						
NAME OF ACTIVITY	9	10	11	12	LEADERSHIP ROLE/AWARDS	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
COMMUNITY ACTIVITIES/VOLUNTEER WORK						
NAME OF ACTIVITY	9	10	11	12	TYPE OF ACTIVITY	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
WORK EXPERIENCE/EMPLOYMENT						
PLACE OF EMPLOYMENT			TYPE OF WORK			

**ADVANCED PLACEMENT/AP/DUAL CREDIT COURSES TAKEN**

NAME OF CLASS	YEAR TAKEN			
	9	10	11	12
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**RATE YOURSELF ON EACH OF THE FOLLOWING, WITH 5 AS HIGH AND 1 AS LOW**

	1	2	3	4	5
MOTIVATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WORK HABITS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PERSONAL RESPONSIBILITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONSIDERATION OF OTHERS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PLEASE LIST 5 ADJECTIVES THAT BEST DESCRIBE THE KIND OF PERSON YOU ARE**

1.	2.
3.	4.
5.	

**DESCRIBE HOW YOU HAVE DEMONSTRATED LEADERSHIP DURING YOUR HIGH SCHOOL YEARS**

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**WHAT DO YOU SEE AS YOUR STRENGTHS AND WEAKNESSES**

STRENGTHS	WEAKNESSES

**DESCRIBE ANY EXCEPTIONAL TALENTS OR ORIGINALITY IN ANY FIELD SUCH AS ART, MUSIC, SCIENCE, LITERATURE, MATHEMATICS, OR TECHNOLOGY/ENGINEERING**

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