

TEACHER LETTER OF RECOMMENDATION REQUEST

Student Name: _____ Date Letter Needed By: _____

Student contact info.: email _____ cell # _____

First person in your family to attend college? _____ yes _____ no First generation? _____

_____ yes _____ no

Letter electronically submitted _____ Teacher to mail letter _____ Student will pick-up _____
(provide stamped, addressed envelope)

Instructions to students: Fill out this form to evaluate your strengths and involvement in school and extracurricular activities. Please allow ten working days from the date filed to complete letter.

Instructions to Writer of Letter of Recommendation:

College or Scholarship Name: _____

Qualifications/Selection Criteria: _____

DEADLINE: _____

Academics:

GPA: _____ Class Rank: _____ in a class of: _____

Admission Test Scores: SAT: _____ ACT: _____

Intended College Major (s): _____

Long Range Career Plans:

Coursework in Subject Area of Teacher writing letter:

<u>Year</u>	<u>Course</u>	<u>Grade Earned</u>	<u>Year</u>	<u>Course</u>	<u>Grade Earned</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

List academic awards or honors & when you received them:

Extracurricular (List your in-school and out-of-school community service and total hours of service.):

<u>Year</u>	<u>Description of Activity/ Club</u>	<u>Positions Held & Awards</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

