### **Counselor Letter of Recommendation Requests**

#### Required for Scholarships/Common Application/College School Report

**<u>Read these instructions carefully.</u>** Ask an assistant in the counseling office for clarification of any step you do not understand or about which you need more information.

Most colleges **DO NOT** require a letter of recommendation. But if you are applying to a Common App school, or scholarship then you will probably want your counselor to write a letter. Please read your college and scholarship applications carefully and follow the instructions just as requested. Make sure you meet all the deadlines. Allow teachers and counselors plenty of time to complete the process (at least three weeks!).

#### AFTER YOU HAVE ASCERTAINED THE NEED FOR A COUNSELOR LETTER OF RECOMMENDATION:

- Complete the Letter of Recommendation Information form. This information provides your
  counselor with personal information, highlighting your distinctive characteristics. Your letter of
  recommendation may include quotes from this form-so be sure to put some thought into your
  answers. College admissions committees, scholarship committees, or prospective employers gain
  valuable knowledge of your strengths through our letters.
- Have your parents or guardians complete the Brag Sheet. If you have a typed resume, you can also attach it to your packet.
- Distribute at least three **Teacher's Evaluation** forms to faculty members whom you feel will give
  you high marks in the majority of the categories listed and provide anecdotal information on the
  back. Be sure to include the counselor name and allow the teacher at least two weeks to return
  completed evaluation to the counselor. Remind your evaluators that the anecdotal information is
  <a href="extremely">extremely</a> important. Counselors use this information in quotes to provide personal insight into your
  character. Faculty members should return the form directly to your counselor.
- Once you complete your portion and the parent portion of the packet, then bring the packet directly
  to your assigned counselor. If your counselor is not available, hand your complete packet to a
  counselor assistant.

Counselor Name	Alpha Split	Email	Office Number
LeKeitha Johnson	A - F	lljohnson@galenaparkisd.com	832-386-4125
Andrea Jones	G - N	ajones1@galenaparkisd.com	832-386-4127
Felicia Oliver	O - Z	foliver@galenaparkisd.com	832-386-4109

Counselor Name	Alph a Split	Email	Office Number
Tabitha Sapien	A - F	tsapien@galenaparkisd.com	832-386-4790
Pamela Wallace	G-N	pwallace@galenaparkisd.com	832-386-4150
Sherronda Galloway	O-Z	sgalloway@galenaparkisd.com	832-386-4107

• Request Transcript using NSSH>STUDENT>Transcript Request after you have applied.

## YOU MUST ALLOW THE COUNSELOR A MINIMUM OF THREE WEEKS BEFORE THE DEADLINE TO WRITE YOUR LETTER OF RECOMMENDATION

• If you complete a paper application (primarily for scholarships):

Paper clip the completed letter of recommendation packet, paper application and deliver contents to your counselor. However, you still must request a transcript through NSSH>STUDENT>Transcript. After teachers return their evaluations, the counselor will write the letter of recommendation for you to include in your packet. Be sure to have a stamped envelope that is already addressed!

## Letter of Recommendation Information

Student Name:		Date:
Class Rank: of	: 	
List competitions and aw	vards you have won, beginning wi	th 12 <sup>th</sup> grade and working backward.
<u>Award</u>	<u>Date</u> <u>Award</u>	<u>Date</u>
	<del></del>	<del></del>
List your club and organic community, and church a	ization memberships-both in and o	out of school, including school,
Name of Organization	Office Held or Act	tivity Performed

3. List your work exper	ience.	
Employer	Duties and Responsibilities	
Dates: to		
Dates: to		
Dates: to		

7. What is the most important thing I should say about you?	
	<del>-</del>
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Counselor

# PARENT "BRAG SHEET" FOR COLLEGE RECOMMENDATION

Name	of Student:
1.	In what developmental areas has your child shown the most growth during the past several years?
2.	What do you consider to be your child's outstanding personality traits?
3.	Are there any unusual and/or personal circumstances (negative or positive) that have affected your child's academic performance or growth process?

Parent Signature

## TEACHER EVALUATION

	is requesting a <i>counselor</i> let	ter of recommend	ation.
Please assist me by checking the list below a	nd adding anecdotal remarks to	the back of this f	orm
describing the student's strengths and skills.	Please return to the counselor	within 3-4 weeks,	before the
due date of application. Thanks!			

Characteristics	Exceptional	Outstanding	Excellent	Above Average	Average or Below	No basis to judge
Intellectual ability						
Academic motivation						
Academic creativity						
Academic achievement						
Personal initiative						
Critical thinking						
Potential for college success						

Leadership			
Independent decisions			
Self confidence			
Respected by peers			
Open-mindedness			
Integrity			

#### How would you compare the applicant to his or her entire class?

Please check the single most appropriate box.

Characteristics	Exceptional	Outstanding	Excellent	Above Average	Average or Below	No basis to judge
Academics						
Character						
Overall						

Describe this applicant's principle strength(s	3).	
Please include any other relevant information	n (positive or negative).	
	<del>-</del>	
Faculty/Staff Member	Date	

Counselor

## **TEACHER EVALUATION**

	is requesting a <u>counselor</u> letter of recom	mendation.
Please assist me by checking the list below a	and adding anecdotal remarks to the back of	f this form
describing the student's strengths and skills.	Please return to the counselor by	Thanks!

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Intellectual ability						
Academic motivation						
Academic creativity						
Academic achievement						
Personal initiative						
Critical thinking						
Potential for college success						
Leadership						

Independent decisions			
Self confidence			
Respected by peers			
Open-mindedness			
Integrity			

#### How would you compare the applicant to his or her entire class?

Please check the single most appropriate box.

Characteristics	Exceptional	Outstanding	Excellent	Above Average	Average or Below	No basis to judge
Academics						
Character						
Overall						
Describe this applicant	's principle strer	ngth(s).	1	1	ı	

Describe this applicant	's principle strer	ngth(s).					
			<del></del>				<del></del>
Please include any other	er relevant infor	mation (positi	ve or negat	tive).			
Faculty/Sta	ff Member				Date	_	
Counselor							

## **TEACHER EVALUATION**

	is requesting a <u>counselor</u> letter o	of recommendation. Please assist
me by checking the list below and addin	ng anecdotal remarks to the back	of this form describing the
student's strengths and skills. Please re	eturn to the counselor by	Thanks!

Characteristics	Exceptional	Outstanding	Excellent	Above Average	Average or Below	No basis to judge
Intellectual ability						
Academic motivation						
Academic creativity						
Academic achievement						
Personal initiative						
Critical thinking						
Potential for college success						

Leadership			
Independent decisions			
Self confidence			
Respected by peers			
Open-mindedness			
Integrity			

Characteristics

Exceptional

#### How would you compare the applicant to his or her entire class?

Please check the single most appropriate box.

Excellent

Above

**Average** 

Date

No basis

Outstanding

Cital acteristics	Exceptional	Outstanding	Execution	Average	or Below	to judge
Academics						
Character						
Overall						
Describe this applicant's	s principle strer	ngth(s).				
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Please include any oth	nor relevant info	rmation (posit	ivo or poga	utivo)		
		mation (posit				

Counselor

Faculty/Staff Member