

AHS/SILSA REQUEST FOR COUNSELING LETTER OF RECOMMENDATION

Student Name: _____ Date: _____

**Return this form to your School Counselor at least 2 weeks before your deadline, along with any forms that
need to be completed from the college.
No recommendation can be completed unless all forms are received.**

Intended college major and career goal: _____

Are you planning on taking any dual enrollment courses in the Spring of senior year? _____

List at least four adjectives or personal characteristics that describe you.

a. _____

b. _____

c. _____

d. _____

What do you consider your greatest strengths? Also, describe a time you had to overcome a situation.
(Please feel free to attach additional pages as needed).

Please list any unusual circumstances (financial need, change in family, loss of income, health, family situations, academic roadblocks, etc.).

Please list here or attach a resume of any extracurricular activities, athletics, clubs, honors, awards, community service work, employment, community groups, etc. that you have been involved in.

What are your SAT and ACT scores?

| Test | Test Date (add future dates too) | Reading | Math | Writing | ACT Composite |
|-----------|----------------------------------|---------|------|---------|---------------|
| SAT / ACT | | | | | |
| SAT / ACT | | | | | |
| SAT / ACT | | | | | |
| SAT / ACT | | | | | |

What colleges are you planning on applying to, and what are your deadlines?

| College Name | Application Deadline | Do your SAT/ACT test scores fall into their range? | Does your GPA fall into their range? |
|--------------|----------------------|--|--------------------------------------|
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If you had to write your own letter of recommendation, what would you say? Is there anything else you would like to include?