Oakmont High School Request for Letter of Recommendation

- Allow at least **TWO WEEKS** for your teacher/counselor to complete this recommendation
- Always make your request in person
- Select a teacher/counselor that knows your classroom (or academic) ability best.

Name:								
Letter of Recommendation is for: \Box College \Box Scholarship \Box								
Please address to: _								
College Major(s):Career Choice(s):								
Colleges applying to:								
Test Scores:								
Test	Total	Reading		Writing		Mathematics		
PSAT								
SAT Reasoning								
ACT plus writing								
SAT Subject	Subject & Score:	Subject & So	core:	Subject & Sco	re:	Subject & Score:		

Self Rating: Compared to other students in your class, please rate yourself using the following scales. Please be as honest as possible.

Qualities	Below	Average	Above	Excellent	Outstanding
	Average		Average	(top 10%)	(top 5%)
Academic Achievement					
Intellectual curiosity					
Initiative/Motivation					
Creativity					
Self-Confidence					
Leadership					
Responsibility					
Integrity					
Concern for others					
Sense of humor					
Emotional maturity					
Resourceful					
Reaction to setbacks					
Respect for faculty					
Respect for peers					

1. List five words that describe you:							
2. Describe your favorite classes in high school and why.							
3. Please list three teachers that know you well							
4. What are your academic strengths (e.g. writing, research, problem-solving)?							
Feel free to attach your activities resume in place of this chart							
Extra Curricular Activity	9	10	11	12	Leadership Roles, Honors, Awards, etc.		
5. Which activity was most important to you and why?							
2 don'tty i'do most important to you and why i							
6. Please share anything else that might be helpful in preparing your recommendation							
Reminder: Be sure to thank to	each	ers w	ho ta	ke the	e time to write you a letter of recommendation.		