

# SCHOOL COUNSELOR RECOMMENDATION 2020-2021

## Section 1: To be completed by the Student (please Print)

Student complete section 1 and submit the form to your school counselor to complete the remaining sections.

Name: \_\_\_\_\_ Gender: M / F

Address: \_\_\_\_\_

Current School: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Email Address: \_\_\_\_\_

## Section 2: To be completed by the School Counselor

Instructions for counselor: After completion, sign and return the form with any current transcript, profile, and schedule of courses in progress for this student. Send materials to **STEM Academy, Admissions, 129 Renshaw Ave, East Orange, NJ 07017, Call (973) 266-5900 or Email: [EOSTEMadmissions@gmail.com](mailto:EOSTEMadmissions@gmail.com).**

### STUDENT DATA VERIFICATION:

Student GPA: \_\_\_\_\_ based on \_\_\_\_\_ semesters

Class Rank: \_\_\_\_\_ out of \_\_\_\_\_ based on \_\_\_\_\_ semesters

### Reference Assessment:

	No Basis	Below Average	Average	Above Average	Excellent
Academic Motivation					
Academic Ability					
Academic Potential					
Personal Character					
Emotional Stability					

Comments: \_\_\_\_\_

I recommended this student: \_\_\_ with reservation \_\_\_ fairly \_\_\_ strong \_\_\_ strongly

\_\_\_ Enthusiastically

School Counselor Name (Please print): \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_