



Date Received by Counselor: ____/____/____

Date Sent by Counselor: ____/____/____

Request for Counselor/School Recommendation Packet

Student Name: _____ ID #: _____

NOTE 1

Recommendation Packets must
be brought to the counseling
office
AT LEAST (15) BUSINESS DAYS
PRIOR
to the deadline for mailing the
recommendation.

NOTE 2

****RECOMMENDATIONS
CANNOT BE WRITTEN UNTIL
THIS FULL PACKET IS
COMPLETED.**

NOTE 3

Schedule an appointment with
your counselor to turn in this
packet and any
college/university counselor
recommendation forms.

Colleges I'm Applying To	Deadline	Counselor Recommendation	Online Counselor Recommendation or Paper Copy
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Online <input type="checkbox"/> Paper
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Online <input type="checkbox"/> Paper
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Online <input type="checkbox"/> Paper
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Online <input type="checkbox"/> Paper
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Online <input type="checkbox"/> Paper

Are you applying Early Decision (binding) to any of the above schools? ☐ Yes ☐ No

If yes, please list the school. _____

Transcript Requested (Circle)? Yes No

(All colleges require a transcript as part of their application.)

College Recommendation Form(s) Included (Circle)? Yes No, form not required by college

(Check College Website for Recommendation Form vs. Free-Form Letter needed)

I request that the Harrison High School Counseling Office send a letter/ letters of recommendation to the above schools/organizations.

Student Signature: _____ Date: ____/____/____

Senior Resume Packet

Name: _____ Today's Date: ____/____/____
(Last) (First)

Student Email: _____

Cell Phone Number: _____

My Senior Year Courses			
Fall Semester		Spring Semester	
1		1	
2		2	
3		3	
4		4	

**** GIVE AS MUCH INFORMATION AS POSSIBLE TO ENSURE THE MOST PERSONALIZED RECOMMENDATION. ****

1. Do you plan to apply for any scholarships? _____ YES _____ NO

*You must turn in all confirmation letters of any scholarships or awards to your counselor.

- 2. What intrigues you about your career choice/goal?**

- 3. High school honors/awards that I have won:**

Honor/Award Name	Grade(s) Received	Description and/or Additional Notes (e.g. reason award was received)
	9 10 11 12	
	9 10 11 12	
	9 10 11 12	
	9 10 11 12	

Attach additional sheets if needed

4. **Work Experience** (paid and unpaid)

Company: _____	<input type="checkbox"/> Paid <input type="checkbox"/> Unpaid
Job Title/Position: _____	
Job Description: _____ _____	
Time Commitment: _____ hours/week Dates of Employment: ____/____/____ - ____/____/____	
Leadership Role: _____ _____	
Skills gained from this job: _____ _____	

Company: _____	<input type="checkbox"/> Paid <input type="checkbox"/> Unpaid
Job Title/Position: _____	
Job Description: _____ _____	
Time Commitment: _____ hours/week Dates of Employment: ____/____/____ - ____/____/____	
Leadership Role: _____ _____	
Skills gained from this job: _____ _____	

5. **Extracurricular Activities** (e.g., school events, sports, clubs, volunteer work, community service)

Activity: _____	Type (circle): School or Community
Club/Organization: _____	
Time Commitment: _____ hours/week _____ weeks/year	Grade(s): 9 10 11 12
Leadership Position Held: _____	Grade(s) Position Was Held:
_____	9 10 11 12
_____	9 10 11 12
Explain your involvement and what you personally gained: _____ _____ _____	

Activity: _____ Type (circle): School or Community

Club/Organization: _____

Time Commitment: _____ hours/week _____ weeks/year Grade(s): 9 10 11 12

Leadership Position Held: _____ Grade(s) Position Was Held:

_____ 9 10 11 12

_____ 9 10 11 12

Explain your involvement and what you personally gained: _____

Activity: _____ Type (circle): School or Community

Club/Organization: _____

Time Commitment: _____ hours/week _____ weeks/year Grade(s): 9 10 11 12

Leadership Position Held: _____ Grade(s) Position Was Held:

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Activity: _____ Type (circle): School or Community

Club/Organization: _____

Time Commitment: _____ hours/week _____ weeks/year Grade(s): 9 10 11 12

Leadership Position Held: _____ Grade(s) Position Was Held:

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_____ 9 10 11 12

Explain your involvement and what you personally gained: _____

Activity: _____ Type (circle): School or Community

Club/Organization: _____

Time Commitment: _____ hours/week _____ weeks/year Grade(s): 9 10 11 12

Leadership Position Held: _____ Grade(s) Position Was Held:

_____ 9 10 11 12

_____ 9 10 11 12

Explain your involvement and what you personally gained: _____

Activity: _____ Type (circle): School or Community

Club/Organization: _____

Time Commitment: _____ hours/week _____ weeks/year Grade(s): 9 10 11 12

Leadership Position Held: _____ Grade(s) Position Was Held:

_____ 9 10 11 12

_____ 9 10 11 12

Explain your involvement and what you personally gained: _____

6. Describe yourself in 3 words:

Word	Examples from my Life

7. What makes me who I am?

8. Describe what you are passionate about:

9. What should a college admissions director know about you as a student that cannot be measured by grades/ and/or test scores:

10. When did you last push the boundaries of your comfort zone?

11. Explain what you would like emphasized in a recommendation letter:

12. How do you spend the majority of your free time? Why?

13. Specifically, what you will contribute to a college community?

Parent Worksheet

Student Name: _____

Briefly describe your son/daughter, including outstanding or unusual qualities.

(Anecdotes are very helpful in distinguishing your child from others!)

List any events or experiences you feel have significantly influenced him/her.

List some activities your son/daughter has always enjoyed.

At present, what do you see as his/her strengths and weaknesses (academic and personal)?

Describe anything in particular about your son/daughter you feel the college should be made aware of.

Please address any special considerations that affect the decision of where to apply to/attend college. _____

Core Teacher Worksheet

THIS FORM IS **NOT** SENT TO COLLEGES AND/OR UNIVERSITIES.

Students: Please give this form to a core teacher who knows you well.

Teachers: Please complete and return this form directly to the school counseling office.

Student Name: _____ **Teacher:** _____

1. What words come to mind when you think of this student?

2. What makes this student different from other students that you teach?

3. Please share any other thoughts, observations, or feelings that would help me to better understand this student. Continue on back if needed.

4. According to your professional judgment, please rate this student to his or her peers in this graduating class.

No Basis for Judgment	Student Quality	Below Average	Average	Above Average (top 25%)	Excellent (top 15%)	Outstanding (top 5%)
	Academic Potential					
	Academic Achievement					
	Willingness to go beyond the minimum					
	Co-curricular involvement					
	Commitment to service					
	Creative Thought					
	Ability to interact with different groups					
	Positive impact at school					
	Character & integrity					
	Maturity					
	Disciplined work habits					
	Motivation					
	Leadership					
	Reaction to set backs					
	Warmth of personality					
	Respect accorded by faculty					
	Respect accorded by peers					
	Self-confidence					
	Initiative					
	Overall					

Core Teacher Worksheet

THIS FORM IS **NOT** SENT TO COLLEGES AND/OR UNIVERSITIES.

Students: Please give this form to a core teacher who knows you well.

Teachers: Please complete and return this form directly to the school counseling office.

Student Name: _____ **Teacher:** _____

5. What words come to mind when you think of this student?

6. What makes this student different from other students that you teach?

7. Please share any other thoughts, observations, or feelings that would help me to better understand this student. Continue on back if needed.

8. According to your professional judgment, please rate this student to his or her peers in this graduating class.

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	Commitment to service					
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	Maturity					
	Disciplined work habits					
	Motivation					
	Leadership					
	Reaction to set backs					
	Warmth of personality					
	Respect accorded by faculty					
	Respect accorded by peers					
	Self-confidence					
	Initiative					
	Overall					

Harrison Staff Worksheet

THIS FORM IS **NOT** SENT TO COLLEGES AND/OR UNIVERSITIES.

Students: Please give this form to any Harrison STAFF member who knows you well.

Teachers: Please complete and return this form directly to the school counseling office.

Student Name: _____ **Teacher:** _____

9. What words come to mind when you think of this student?

10. What makes this student different from other students that you teach?

11. Please share any other thoughts, observations, or feelings that would help me to better understand this student. Continue on back if needed.

12. According to your professional judgment, please rate this student to his or her peers in this graduating class.

No Basis for Judgment	Student Quality	Below Average	Average	Above Average (top 25%)	Excellent (top 15%)	Outstanding (top 5%)
	Academic Potential					
	Academic Achievement					
	Willingness to go beyond the minimum					
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	Creative Thought					
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