

SJCA Counselor Recommendation Form - Student Information

Student's Name: _____ **Counselor:** _____

In order for your counselor to write a solid letter of recommendation, it is important that you complete this questionnaire. Please focus on both your in-school and out-of-school experiences when answering the questions below. It would be helpful for you to share any unique talents and experiences you may have with your counselor. **Feel free to use additional paper if necessary.** The information you provide will be used as we compose your recommendation. Please return to your counselor at your Junior one-on-one meeting with your parents/guardians.

List the colleges you are currently researching and/or planning on applying to in the fall.	
_____	_____
_____	_____

What adjectives would you use to describe yourself?

What are your significant talents and strengths? (academic and/or co-curricular)

List the accomplishment you are most proud of. How would you say this accomplishment has affected your life? (academic or co-curricular)

Has there been a personal circumstance that has affected your life? (if applicable)

Is there something on your transcript that you feel does not accurately reflect your ability as a student? (if applicable)

How have you changed during your time at St. Joseph Catholic Academy?

Provide as much detail when completing the form below, reflecting on your experiences outside the classroom:

	Description/Position Held	Yr	Yr	Yr	Yr
Work Experience		9	10	11	12
SIGNIFICANT Co-Curriculars Activities					
Volunteer Experience					
Honors/Awards					
Summer Experiences					

Additional Relevant Information that your counselor should know::