Counselor Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Profile Packet for Recommendation Letters

**READ THE DIRECTIONS FIRST!!**

When requesting Letters of Recommendation, please complete this profile packet first and then give it to your teacher or counselor. It takes approximately **15** school days to complete Letters of Recommendation, College Applications, and/or other paperwork. Complete the information below and then answer the questions on pages 2 - 4. Provide as much detail as possible. Save the document as first initial and last name, then email to your counselor or teacher as an attachment.

**Student’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Intended College or Plan after High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Career Choice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Authorization:** I hereby authorize \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to write a letter of recommendation or complete college applications which include confidential information such as G.P.A., class rank, grades, social security number (if required) and other pertinent information. This request serves as an exception to the privacy code selected and on file with Tompkins High School. Additionally, I waive the right to see the recommendation submitted. A parent/guardian signature is required if you are not yet 18 years of age.

|  |  |
| --- | --- |
| Student Printed Name: |  |

* By checking this box, I acknowledge that I am electronically signing this form allowing OTHS counselors to provide recommendations on behalf of the student listed above. **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| Parent/Guardian Printed Name: |  |

* By checking this box, I acknowledge that I am electronically signing this form allowing OTHS counselors to provide recommendations on behalf of the student listed above. **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The counselors/teachers would like you to answer the following questions in such a way that they can write a recommendation that will reflect you as an individual and be personal in nature. This packet is to be completed and returned to your counselor and/or teacher before they can write a recommendation.**

 **Academic Pursuits**

1.What academic awards have you won in high school?

2. Which courses in high school were your favorite and why?

**Extracurricular Activities**

1. Name the extracurricular activities you were involved in during high school and how long you were in them.

2. What has been your favorite extracurricular activity and why?

3. What volunteer or community service have you participated in and approximately how many hours are spent serving?

 4. What leadership positions have you held while at OTHS? At your religious organization? Or at other organizations/clubs? Which leadership position gave you the most satisfaction and why?

5. How do you use your free time?

6. Work experience (include dates and responsibilities).

**Personal information**

1. Choose one of the following to write a paragraph about: Your favorite memory while at OTHS; something you have done or participated in that you are the proud of; or something you would change n your High School experience if you could – what would it be and why.

2. Have you had to overcome any obstacles such as loss of a significant person, financial difficulty, shyness, illness, a major disappointment, etc? Describe how you overcame your obstacle or what you learned from that experience.

3. Identify your greatest strength? Weakness?

4. List four (4) adjectives your friends or family would use to describe you.

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Imagine an admissions counselor asks you: “What will you bring to our campus?” What would you say?

6. Describe your most meaningful activity in or out of school or any other information which you consider important for your counselor to include in your recommendation letter. OR **Write a one-page letter recommending yourself** to a college/program admission and/or scholarship committee.

Counselors are assigned according to the student's last name. The email contacts are listed below:

**Last Name Counselor Email address**

A – CEE Becca Naseman rebeccamnaseman@katyisd.org

CEF – GER Colin Weatherford colinmweatherford@katyisd.org

GES – KIT Michelle Khan michellekhan@katyisd.org

KIU – MOR Carmen Valdez carmenvaldez@katyisd.org

MOS – RAU Dennis O’Callaghan dennismocallaghan@katyisd.org

RAV – SOR Krista Luna kristalluna@katyisd.org

SOS – Z Alejandra Páez alejandracpaez@katyisd.org