



JOHN PAUL II CATHOLIC HIGH SCHOOL TEACHER RECOMMENDATION REQUEST FORM



Students:

- It is the student’s responsibility to ensure that all requests and documentation required for admissions/scholarships are submitted in time to meet deadlines.
- Please submit request *at least two weeks before deadline.*
- Please submit the following items with this request to your teacher(s):
 - ___ Stamped envelope addressed to each college/university.
 - ___ Teacher/Counselor Evaluation Form (*Download the needed form, i.e. from www.commonapp.org or college/university/scholarship website.*)
 - Note: ApplyTexas does not require a Teacher or Counselor Evaluation Form, but two letters of recommendation are highly encouraged.*
 - ___ Resume, Activities Log, or Student Self-Assessment from Summer College Application Packet.
- The teacher will send the recommendation letter directly to the college/university.

Dear _____:
(Name of Teacher/Counselor)

I am applying to the following colleges/universities/scholarships. An evaluation form and/or recommendation letter is required. Would you please consider writing one for me?

| | Application Form Used | |
|--|-----------------------------------|----------------------|
| Name of College/University/Scholarship | Apply Texas/Common App/ Other? | Application Deadline |
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |

Student Signature _____

Student Printed Name _____ **Date of Birth** _____
(Full name used on admissions application)

Social Security No. _____ *(Optional, but helpful in matching required documents with proper student by college admissions personnel.)*

Date of Request _____

••••••• **TEACHERS:** Please write recommendation letters on official school letterhead. Be sure to include the student’s full name, DOB, and Soc. Sec. No. if provided. •••••••

Teacher Checklist: Letter written Date Mailed: _____

Return this form to Mrs. Strickland.