

Marine Science Magnet High School
Department of School Counseling
Letter of Recommendation Request

Student's Name: _____ Today's Date: _____

School(s) / Scholarships applying to:

- o _____
- o _____
- o _____
- o _____

Letter needed by: _____ *(Please allow at least two weeks.)*

Letter to be returned to: (Circle) Student Counselor

In order to personalize your recommendation, the following information would be helpful:

- o Clubs, teams, activities

- o Any titles or offices held (i.e. team captain, class officer, etc.):

- o Jobs (after school & summer):

- o Hobbies, Interests, etc.:

- o Personal strengths (list 3):

- o College major/career interests:

- o Community service/volunteer experiences:

Additional information that might be helpful including special project or story about the class you took with the teacher/counselor who is writing this letter:

