Letter of Recommendation (LOR) Questionnaire

The information you provide in this questionnaire will be helpful as your letter of recommendation is written. Please complete in detail (short paragraphs with complete sentences) and return to your counselor no later than two weeks prior to the date the letter of recommendation is needed.

Name:		
LOR Due Date:		
Purpose of letter (Ex. Job, Scholarship, College Application):		
1. What are your academic/career goals? Intended major?		
2. What schools are you considering? Have you applied?		
3. What is an accomplishment you are proud of?		
4. What are three adjectives you would use to describe yourself?		
5. Have there been obstacles you have had to overcome? Are there any special or unusual circumstances?		

6.	Do you have a hobby or special interest?
7.	Who are three teachers who could best provide feedback about your performance in classes or activities?
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8.	What is something you have learned about yourself in high school?
9.	Have you held any leadership positions?
10). Anything else? What is important to you that should be included in a letter of recommendation about you?
* F	Please attach a resume listing ALL of your extracurricular activities, work experience, honors/awards,
CC	ommunity service, etc. A sample is attached.