



RECOMMENDATION LETTER REQUEST

A letter of recommendation form must be completed and turned in for every request.
Make sure the person you are requesting the letter from has a copy of your packet information (High School Resume)

Please provide the following information:

YOUR NAME: _____ **Student ID:** _____ **Date:** _____

Letter is for-- _____ *College Admission* _____ *Scholarship* _____ *Generic*
 _____ *other* _____

Letter is to be written to: Please list the college(s), scholarship organizations, other for which you need a recommendation letter and include their applicable deadline.

College/Scholarship, Etc.

Deadline

_____	_____
_____	_____
_____	_____
_____	_____

(Allow at least two weeks for your letter to be completed)

CHECKLIST:

Please provide the following information to prepare a strong letter of recommendation.

- _____ Recommendation Letter Request Form
- _____ Plainsman Packet (High School Resume)
- _____ Student Self-Assessment
- _____ Teacher Information Form-Optional
- _____ Parent Reference form-Optional

Your letter will not be written until this information is turned in.

(FOR COUNSELOR USE ONLY)

Date received by counselor _____ **Date completed** _____

_____ **SAT/ACT test scores** _____ **summary of credit** _____ **test card** _____ **schedule with grades**
