

Letter of Recommendation Request

CCS Student: This form is used as a guide to help a teacher that you have asked to write a letter of recommendation on your behalf. Please complete this form and give it to the teacher at least 10 days before you need the letter returned to you. The quality of your responses on this form will help the teacher write the best recommendation.

Student Name: _____ Today's Date: _____

Teacher's Name Receiving Request: _____

Date Letter Needed: _____

College(s) Applying to: _____

What are your strengths that you would like addressed in the letter?

What accomplishment are you most proud of?

What was your greatest learning experience?

List activities that you participated in and your responsibilities.

List any honors or awards you have received.

List hobbies, special interests, and/or volunteer work.

Briefly discuss your future plans/goals.

*Teachers – Letters should be written on CCS letterhead and a signed original provided to Mrs. Pacitto. Thank you!