

Cabarrus Tech Early College



Recommendation Letter Request Packet

*To receive a recommendation, return this completed packet to Ms. Grayson. Note that recommendation letters take time; allow no more than two (2) weeks for letters to be completed and/or submitted. All answers need to be **neatly printed or typed**. You may disassemble this packet if needed, however all forms will need to be submitted together with **this cover sheet on top**.*

Student Full Name:		
Current Grade Level:	Home Address:	
CCS Email Address:		
Last Month you took the ACT:	Last Month you took the SAT:	
<i>Place a check or an X beside each component, indicating that it has been completed <u>and</u> is included in this packet</i>		
Component	Completed	Included
Activities Chart	_____	_____
Student Questionnaire	_____	_____
Teacher Evaluation	_____	_____
Transcript Request Form <small>*Only include this form if you need to have your transcript submitted <u>with</u> your recommendation letter. Form is available on Ms. Grayson's website*</small>	_____	_____

This request is for a (*circle one*): Scholarship College Application Employment/Internship Other

Name of organization receiving recommendation: _____

Provide details on how recommendation will need to be submitted; select the one that applies. *Note that recommendations will not be emailed to unaffiliated addresses and all pickups will be in sealed/stamped envelopes.*

- Web Link - _____
- Postal Title & Mail Address - _____
- Email Address - _____
- Student Pickup - _____
- Other - _____

Date of Packet Submission: _____/_____/_____

Put the date you actually submit this packet, not the date you complete it

Student Signature: _____

Student Activities Chart

Student Name: _____

List the classes in which you are currently enrolled. If you are completing this in 2nd semester, list your 1st semester classes as well.

List all activities including club memberships, athletic/sports teams, special projects, volunteer work, and employment. Provide a brief description of what your role and responsibilities were for each activity listed. Neatly print or type your answers. You may use an additional sheet of paper if needed.

<u>Grade</u>	<u>School Activities</u>	<u>Community Activities</u>
9 th		
10 th		
11 th		
12 th		

Student Questionnaire

Student Name: _____

Answer the questions below. Neatly print or type your answers. You may use additional sheets of paper if needed.

1. What are your college and/or career plans post-graduation? _____

2. Have you received any special honors or awards? If so, list the recognition along with a brief explanation and the year received. _____

3. What makes you “unique” or distinguishes you from other students? _____

4. List three (3) adjectives you would use to describe yourself. Provide a brief explanation of why you chose each adjective. _____

5. What do you consider to be your most outstanding accomplishment – school or otherwise? _____

6. When you have the opportunity to learn things on your own, what do you choose to learn? _____

7. What motivates you? _____
8. Describe in detail any summer experience, work experience, or academic experience that has been is significant importance to you. _____

9. What should those reading your recommendation letter know about you that is not already mentioned here? _____

10. What is your favorite quote and why? _____

Teacher Evaluation – Student Only

*Student, complete the information below. You will need to detach the teacher evaluation chart and submit it to your teacher of choice. After completion, the teacher must put the evaluation in a sealed envelope and return it to you. You will **submit the sealed envelope by stapling it to this page**. Teacher evaluations will not be considered if envelope has been tampered with or is unsealed.*

Student Name: _____

Evaluator of Choice: _____

↓ Staple the untampered sealed envelope anywhere below ↓

Teacher Evaluation – Teacher Only

*Teacher, please complete the evaluation chart below for the student requesting your input. Some of the components will apply to the student's performance in your class as well as their interaction with other students. **When done, this evaluation will need to be placed in a sealed envelope and returned to the student for submission.** Please make sure that the envelope is completely sealed as envelopes that appear to be tampered with or unsealed will not be included in the student's recommendation. Feel free to email or stop by Ms. Grayson's office with any questions you may have ☺*

Student Name: _____

Your Name (please print): _____

Subject(s) Taught: _____

CCS Email: _____

Category	Below Average	Average	Above Average	Exceptional	Unable to Judge
Self-motivated					
Confident					
Independent					
Engaged learner					
Academic achievement					
Effective written and verbal communication					
Participates in class					
Self-disciplined					
Open to growth and change					
Social attitude					
Leadership ability					
Polite					
Responsible					
Level of maturity					
Effectively responds to setbacks					
Respects peers					
Respects authority					
Advocates for self					

Evaluator's Signature: _____

Today's Date: _____