

Letter of Recommendation Request Form

*This form needs to be completely filled in before asking a teacher/administrator for a letter of recommendation.
Be sure to fill out both front and back pages (Items I – VII)
Give the teacher/administrator at least two weeks advance notice.*

Name of Student _____ Phone Number _____

ID Number _____ Date of Request _____

Date of Graduation _____ Current class rank _____

Current GPA _____ Due Date for recommendation letter _____

Recommendation letter is for _____ University

Or _____ Scholarship

(Attach a copy of the scholarship criteria to this form)

Mailing address of university or scholarship

Attn: _____

Background Information:

I. Academic Accomplishments: Academic awards and organizations

(Examples: NHS, President's List, Honors earned)
