



<b>Student's Name:</b>	<b>Student ID#:</b>	<b>Date:</b>
<b>Student Email Address:</b>	<b>Student cell phone number:</b>	
<b>Counselor:</b>		

*Any student needing a counselor recommendation must complete and submit this assessment to their counselor at least 3 weeks prior to the due date. Recommendation letters are confidential communication between high school counselors and the college admissions office and/or scholarship committee. Counselors are not obligated to share the content of their recommendation letter to either the parent and/or the student. Thank you for taking the time to complete this form. The information shared assists your counselor in providing colleges with a thoughtful and thorough student recommendation.*

**What three words best describe you? Why?**

**What are your personal strengths? Give examples.**

**Life's obstacles allow us to grow. Describe an obstacle that impacted you and how.**

**Does your academic record reflect you as a student? What factors have contributed to your performance, positively or negatively? Give examples of your strengths and weaknesses.**

**Please list and describe any work experience or leadership roles you've held. How did these experiences impact you?**

**What school activity (athletics, academic, club, electives related) has been most important to you and why?**

**What activity, event, or situation outside of Riverside, has had the greatest impact on you?**

**Have you made the most of your experience in high school? What would you do differently?**

**What do you hope to accomplish in college or after college, career wise and/or personally?**

**Please share anything else that might be helpful in preparing your recommendation.**

**Please list 2 teachers who know you well; whom you feel could add positive comments to enhance your letter.**

1)

2)