COUNSELOR RECOMMENDATION FORM

STUDENT INSTRUCTIONS:
1. Complete the information below, providing your name & school.
2. Give the recommendation form and envelope to your COUNSELOR to complete for you.

Applicant’s name __________________________ School __________________________
                        Last            First            MI

COUNSELOR INSTRUCTIONS:
1. Background information: Upward Bound is designed to assist students to prepare for and succeed in college. Students who show potential but need motivational and/or academic or other assistance in order to succeed in college may be nominated. We offer classroom instruction, mentoring, tutoring, college and career guidance, and personal, college admissions and financial aid counseling.
2. Please complete both sides of this form, providing the most specific as possible in your remarks
3. Enclose and seal the form in the envelope provided, sign over the seal, and return to the student, who will submit his/her completed application to Upward Bound.

Your name __________________________

1. How long have you known the applicant? _____ years _____ months

2. Based on your knowledge of the applicant, please evaluate this student

<table>
<thead>
<tr>
<th>Aptitude in subject</th>
<th>Outstanding</th>
<th>Above Average</th>
<th>Average</th>
<th>Needs Improvement</th>
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<tbody>
<tr>
<td>Study skills/habits</td>
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<td>Communication skills</td>
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<td>Self-starter, has intellectual curiosity</td>
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<td>Is highly motivated and willing to learn</td>
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<td>Has good classroom attendance</td>
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<td>Works well with peers</td>
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<td>Respects rules and people in authority</td>
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<td>Potential for success in college</td>
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</table>
3. What other qualities come to mind that best describes the applicant?

________________________________________________________________________
________________________________________________________________________

4. Are you aware of any current circumstances or problems which may affect the applicant's performance in this program (e.g., financial background, family responsibilities, educational preparation, health)?

________________________________________________________________________
________________________________________________________________________

5. I ______ Strongly Recommend ______ Recommend ______ Recommend with Reservation ______ Do Not Recommend that this student be admitted to the Upward Bound Program.

Signature_________________________________________ Date________________________________

Please seal this form in the envelope and sign over the seal. Return the sealed envelope to the student who requested the recommendation.

Thank you very much for filling this form.

(Over)