



Letter of Recommendation

****Place recommendation in a sealed envelope and return to student to be turned in with application.**
no later than Friday, March 17, 2023 at 5:00pm**

Student Name: _____

Recommender's Name: _____

Relationship to Applicant _____

E-mail: _____

Phone: _____

Character Criteria of Student Rank 1-5 (lowest to highest; 5 is best)

1. Accountability

- ___ Honors commitments
- ___ Is responsible for personal decisions
- ___ Accepting of consequences
- ___ Willing to admit mistakes

2. Drive for Excellence

- ___ Has a good work ethic
- ___ Gets results
- ___ Exhibits continuous improvement
- ___ Is involved in your local community
- ___ Puts in time above and beyond basic requirements

3. Respect

- ___ Treats others fairly
- ___ Lives up to promises made to others
- ___ Listens to others and is accepting of input from others
- ___ Exhibits consideration for things and people that they encounter
- ___ Maintains self-control

4. Integrity

- ___ Honest
- ___ Trustworthy
- ___ Caring
- ___ Ethical

Please provide any other relevant information.

Signed: _____

Date: _____