

Student Brag Sheet

Please complete this form when requesting letters of recommendation. You may need a letter of recommendation for college applications, scholarships and other senior activities.

DIRECTIONS:

- Download the form to your desktop and "Save" using the following name: "firstname.lastname Brag Sheet mm.dd.yy"
- Answer all questions thoroughly.
- When completed save again and upload the form to you're the Brag Sheet Document Task in "Family Connection" or email it back to me.
- PLEASE NOTE: All requests for letters should allow AT LEAST 10 SCHOOL DAYS.

Name:	Email:
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SAT Reasoning Test Overall Score:	Critical Reading:	Writing:	Math:
ACT Test Overall Score:	Reading:	English:	Math: Science:
AP/IB Tests	TEST: Score: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	TEST: Score: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	TEST: Score: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
	TEST: Score: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	TEST: Score: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	TEST: Score: <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

List the courses you are scheduled to take your senior year.

Fall	Spring

List all the post – secondary options you are considering.

University / College	Community College	Trade School

What is your intended major or area of study in your post-secondary plans?

What is your intended career goal at this time?

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School Activities, Sports, or Clubs	Year of Activity				Description of Activity
	Gr. 9	Gr. 10	Gr. 11	Gr.12	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Community Activities (volunteer)	Year of Activity				Description of Activity
	Gr. 9	Gr. 10	Gr. 11	Gr. 12	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Work Experience (paid)	Year of Activity				Description of Activity
	Gr. 9	Gr. 10	Gr. 11	Gr. 12	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Special Recognition, Awards, Honors	School Year Received				Description
	Gr. 9	Gr. 10	Gr. 11	Gr. 12	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Which **one or two activities** were the most meaningful to you? Why?

List **three to five words** that you would use to describe yourself. **Explain each** with several sentences.

What special talents (music, sports, theatrical, dance, art, video, technology) do you possess? **Explain each** with several sentences.

What obstacle (family, personal, illness, financial, etc.) if any, have you encountered? How did you overcome this obstacle? Explain with several sentences.

OPTIONAL: Please note any additional information that may be helpful to your counselor or teacher in writing your letter recommendation.