

Letter of Recommendation Request Form

Name of Person for whom the letter is to be written

Graduation Date _____

Letter of recommendation for: _____ Employment _____ Post-Secondary School
_____ Scholarship

Type of work, post-secondary school or scholarship applied for and why:

Address the letter of recommendation to the following name and address:

School, business or organization:

To the attention of:

City _____ State _____ Zip Code

Your relationship to the letter writer (teacher, coach, assistant principal, counselor, etc) _

Reminder Notes (Suggested information to give the letter writer):

Attached is a copy of my resume that lists my activities, memberships, and awards/honors.

Please call me at (____) _____ when the letter is ready to be picked up.

____ Please mail the letter in the addressed and stamped envelope that I have provided.

____ Please return your letter to the Staley Counseling Office.

THE LETTER OF RECOMMENDATION IS DUE BY: _____

Thank you in advance.