

Southeast Polk High School Counselor Recommendation Form

Name:	Date:	
Recommendation to:	Date Needed By:	
Address:		
Please complete the following informati	ion so we can write a great letter for you!	
Future Plans:		
School Activities:		
Honors & Awards:		
Special Interests, Hobbies, Talents:		
Service Clubs & Organizations:		
Work Experience:		
Other Information:		
Describe Yourself What will make yo	ou successful after High School?	