

RETURN TO TEACHER

Form A

MIDDLETOWN HIGH SCHOOL SOUTH

Guidance Department 900 Nut Swamp Road, Middletown, NJ 07748

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Early Decision? ____
Early Action? ____
Date of earliest deadline:

Teacher Recommendation Request Form

Student Name: _____ Teacher: _____

Course: _____ School Year Taken: _____ - _____

Student Directions:

1. Complete this form and give to your teacher after personally requesting a letter of recommendation.
2. Log on to your Naviance Family Connection Account and *add* Teacher Recommendation Requests.

Teacher Directions:

1. Please focus your recommendation letter on the student's performance in your class.
2. You may begin uploading letters for the 2018-2019 school year to Naviance beginning on August 15, 2018.
3. Take note of the student's earliest deadline listed in the box above and try to upload at least 10 days prior.

1. I believe that the best piece of work (paper, lab, presentation, etc) that I did for your class was:

2. My favorite memory of your class was:

3. My proudest moment in your classroom was:

4. The moment or experience I found most challenging in your class was:

5. I believe I grew in your class because:

6. My major and career plans are:

7. The colleges I plan to apply to are: