Counselor Recommendation Form
(PLEASE TYPE OR PRINT)

Student: __________________________ High School: __________________________ Grade: __________________________

This recommendation completed by: __________________________ Title: __________________________

1. Please check student's academic program: [ ] College Bound [ ] Non-College Bound

2. Please indicate student's PRIMARY academic need by marking one of the choices below.
   ___ Low high school grade point average
   ___ Low achievement test scores
   ___ Low educational aspirations
   ___ Interest in careers in math and science
   ___ Lack of confidence, self-esteem, and / or social skills
   ___ Low achievement test scores and low educational aspirations
   ___ Low high school grade point average and low educational aspirations
   ___ Lack of career goals and / or need for accurate information on careers
   ___ Low high school grade point average and low achievement test scores
   ___ Lack of opportunity, support, and / or guidance to take challenging college preparation courses

3. Please list student's cumulative GPA: __________________________

4. Please include a copy of student's high school transcript.

5. Please include a copy of student's most recent grade report.

6. Please indicate any tests taken by the student and the corresponding test scores:

   High School Aptitude Tests Taken:
   
   PSAT      [ ] YES [ ] NO If yes, please list score: __________________________
   ACT Plan  [ ] YES [ ] NO If yes, please list score: __________________________

   HI State Assessment (8th grade):
   Math:     [ ] MET STANDARDS [ ] DID NOT MEET STANDARDS
   Reading:  [ ] MET STANDARDS [ ] DID NOT MEET STANDARDS

7. Please rate student in the following areas:
   How long have you known the student: [ ] One Semester [ ] One Year [ ] Other
   The student's attendance record is: [ ] Excellent [ ] Good [ ] Poor
   The student's overall classroom behavior is: [ ] Excellent [ ] Good [ ] Poor

This form has two sides. Please complete and sign the other side of this document.
Please check one:

[ ] Highly recommend  [ ] Recommend with reservation  [ ] Do not recommend
that this student be admitted to the Windward Upward Bound Program at Windward Community
College.

Counselor's Statement
Special consideration should be given to this student because:

Signature ___________________________ Date ____________________

PLEASE RETURN TO STUDENT TO INCLUDE IN APPLICATION PACKET.
A SEALED ENVELOPE MAY BE USED.

PLEASE INCLUDE A COPY OF STUDENT'S HIGH SCHOOL TRANSCRIPT (with test scores)
AND CURRENT GRADE REPORT.