

TEACHER RECOMMENDATION FORM

COGINCHAUG REGIONAL HIGH SCHOOL

Student _____ Teacher _____ Date Submitted _____

Date Required _____

Please list the classes you have taken in this department:

Final Grade

_____	_____
_____	_____
_____	_____
_____	_____

Please list the schools to which you will be applying:

_____	_____
_____	_____

The subject area you are most likely to major in is: _____

SAT Scores: Math _____ Verbal _____

Please list three (3) school activities that you have found to be most significant:

Please list any employment or other activities that you feel are significant:

Write briefly about or list your talents and strongest characteristics: