Guidance Counselor

Student Profile Form

Students Name:_____ **Date:**_____

To the Applicant:
This section is required and must be completed in the format provided. If Incomplete, your application will not be evaluated. The section is to be completed by a High School Counselor or Advisor.

To the Guidance Counselor or Advisor:
You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return in a sealed envelope to the applicant. ***NOTE: A letter of recommendation does not replace this section.***

The applicant's choice of a post-secondary educational program is:
_____ **Extremely Appropriate** _____ **Very Appropriate**
_____ **Moderately Apropriate** _____ **Inappropriate**

The applicant's achievments reflect his/her ability:
_____ **Extremely Appropriate** _____ **Very Appropriate**
_____ **Moderately Apropriate** _____ **Inappropriate**

The applicant's ability to set realistic and attainable goals is:
_____ **Extremely Appropriate** _____ **Very Appropriate**
_____ **Moderately Apropriate** _____ **Inappropriate**

The applicant demonstrates good problem-solving skills, follow through, and completes tasks:
_____ **Extremely Appropriate** _____ **Very Appropriate**
_____ **Moderately Apropriate** _____ **Inappropriate**

The applicant demostrates leadership in the community and classroom:
_____ **Extremely Appropriate** _____ **Very Appropriate**
_____ **Moderately Apropriate** _____ **Inappropriate**

The applicant demonstrates repect for self and others:
_____ **Extremely Appropriate** _____ **Very Appropriate**
_____ **Moderately Apropriate** _____ **Inappropriate**

Additional Comments:

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Signature:_____ **Date:**_____

Title:_____ **Phone Number:**_____