

BRAG PACKET

RECOMMENDATION GUIDELINES

If you are requesting a recommendation and/or secondary school report from your counselor to a college or university for admission or scholarship consideration, please observe the following suggestions:

1. You will find a *permission to release school record information* form, a *personal information & teacher input* form, a *student self portrait* form, a *parent profile* form, and a *college information* sheet.
2. Indicate on each secondary school report the **due date**. Post-it stickers work wonders here!
3. **Submit all forms and requests at one time**. It is much easier for counselors to do several forms at one time than one each week.
4. **Watch your deadlines closely**. Return BRAG PACKET to your counselor **10 working days** before the deadline.
5. High school transcripts must be requested separately through ***Docufide***. **You must allow ten working days for processing**. Go to RBHS.org. Click on "transcripts" and then click ***Docufide***.

The Counseling Office will send the following information with the Secondary School Report forms:

1. School Profile
2. A letter of recommendation (upon request)

You are responsible for submitting the following:

1. Official transcript through ***Docufide***.
2. Official SAT (Reasoning & Subject) and/or ACT scores from College Board or ACT.
3. Your application and deposit before the due date.
4. Your teacher(s) recommendation given to your teacher(s) in a timely fashion and in a stamped envelope addressed to the college

Remember to write a thank-you note to those who have written letters of recommendation for you. Please let us know where you are admitted and when you receive scholarships. We would enjoy hearing about your successes.

Permission To Release School Record Information

Name of Student: _____ ID Number: _____
(Print Name)

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), I, the parent or legal guardian of the student whose name appears above, hereby authorize staff members of the Poway Unified School District to write letters of recommendation and complete forms in which they may reference educational records and information, including, but not limited to: grades, GPA, class rank, courses taken, test results, extracurricular activities, awards/recognition, discipline and attendance records.

These letters of recommendation and forms may be used for:

College Application(s) Scholarship(s) Other: _____
(Please describe in detail)

The letter of recommendation will be sent to (Print name and full address of receiving party): _____

I understand further that (1) I have the right not to consent to the release of my student's school records; and (2) I have the right to receive a copy of such records upon request. This consent shall remain in effect until revoked by me, in writing, and delivered to the school's Registrar. Such revocation shall not affect disclosures previously made by any P.U.S.D. staff member prior to the receipt of any such written revocation.

- I waive my right to review a copy of my student's letter(s) of recommendation at any time in the future.
- I do not waive my right to review a copy of my student's letter(s) of recommendation at any time in the future.

Parent/Guardian Signature _____ Date: _____

Student's Signature: _____ Date: _____

THIS INFORMATION IS RELEASED SUBJECT TO THE CONFIDENTIALITY PROVISIONS OF FERPA AND OTHER APPROPRIATE STATE AND FEDERAL LAWS AND REGULATIONS, WHICH PROHIBIT ANY FURTHER DISCLOSURE OF THIS INFORMATION WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS.

NOTE: Communications with receiving institutions will mention when a parent and/or legal guardian has chosen not to waive FERPA rights.

Visit the PUSD web page at: <http://www.powayusd.com> and review information on waiving / not waiving your right to review letters of recommendation. See "Students; Preparing for College; Letters of Recommendation".

NAME: _____

GRADE: _____

PERSONAL INFORMATION FORM

It is important that this form be filled out accurately and completely to help your counselor in preparing the recommendation for your use in applications for college. Please allow the counselor **10 working days** for completion.

1. List three teachers who know you well. Submit a Teacher Input Form to each and request that it be returned to your counselor.

1) _____ 2) _____

3) _____

2. Describe your college and career plans.

3. HONORS AND AWARDS		
Honors or Awards	Description of Honors or Awards	Date Received Mo / Year

4. EXTRACURRICULAR ACTIVITIES									
Activity	Description of Activity (note any leadership positions)	Year(s) of Involvement						Hours Per Week	Weeks Per Year
		9 th	10 th	11 th	12 th	After 12 th	No. of yrs		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

5. VOLUNTEER WORK AND COMMUNITY SERVICE (unpaid)									
Organization	Description of Service or Work	Year(s) of Involvement						Hours Per Week	Weeks Per Year
		9 th	10 th	11 th	12 th	After 12 th	No. of yrs		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

6. SPECIAL PROGRAM PARTICIPATION (Indicate participation in programs such as EAOP, MESA, Puente, Upward Bound, AVID, etc.)									
Program Name	Description of Program	Year(s) of Involvement						Hours Per Week	Weeks Per Year
		9 th	10 th	11 th	12 th	After 12 th	No. of yrs		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

7. EMPLOYMENT (paid)										
Position	Responsibilities	Year(s) of Involvement						Begin Mo/Yr	End Mo/Yr	Hours Per Week
		9 th	10 th	11 th	12 th	After 12 th	No. Of yrs			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

STUDENT SELF PORTRAIT

Name of Student: _____

Date: _____

RETURN TO COUNSELOR

Dear Seniors:

Please provide some information which will help us write your college recommendations. This is not intended as an inquisition, but rather as a way for us to get to know you better. The more you tell us about yourself, the more prepared we will be to write a quality recommendation.

Please return this to your counselor as soon as possible. Do not worry about making your answers perfect. We are more concerned with getting the information than with the quality of your writing.

Sincerely,

The Counselors

What academic areas have you enjoyed so far? Why? What academic interests would you like to pursue in college? Is there anything you have not studied that you would like to try?

What is the greatest academic challenge you have ever faced? Why?

Are there any outside circumstances (family situations, illness, etc.) that have interfered with your ability to do well in school? If so, what are they?

What extracurricular interests mean the most to you? Why? What would you like to continue (or begin) at college?

What is the greatest personal challenge you have ever faced? Why?

What are the first words that come to mind to describe yourself academically? 3 Socially? (Do not limit yourself to just a few words.)

Academically

Social

- 1) _____
- 2) _____
- 3) _____
- _____

- 1) _____
- 2) _____
- 3) _____
- _____

Brag a little for me. What can you do that is unusual? What specific talents do you have? What makes you different from everyone else?

PARENTS' PROFILE

Name of Student: _____ Date: _____

Name of Parent/Guardian Answering this Questionnaire: _____

RETURN TO COUNSELOR

Dear Parents of this Year's Graduating Class:

The counselors at Rancho Bernardo High School are asking parents to provide a brief portrait of their son or daughter. We offer college guidance and write recommendations for students, and these portraits are extremely helpful since parents have a perspective and depth of knowledge born of years of experience. Each student will be asked to fill out a detailed questionnaire as well, but it is easier for parents to describe their child's unique qualities and talents, than it is for the child himself.

Please answer the following questions as thoroughly as possible. The more you tell us about the things you find relevant to your child, the better we will know them and be able to write about them.

Many thanks for your time and efforts; they are much appreciated. You may send your completed form to school with your child or mail it to the counseling department. We look forward to learning more about your student.

Sincerely,

Counseling Department

Phone numbers and e-mail where I can reach you quickly if I need information for college applications. Please specify name of person and whether number is at home or work:

If you have any information about your student's history (strengths and weaknesses, social, medical, academic development, etc.) which would help me in writing this letter, please let me know.

If your child has accomplishments, activities, or hobbies worth special attention in my recommendation (and which he or she might forget to mention), please list them below:

Please brag a little for me so I can do the same in my recommendation for your child. What makes you proud of him/her? What is the most terrific thing your child has done in the past three years? Please note: *anecdotes are extremely helpful*:

Is there anything else relevant to your child which I should address? If so, please respond below:

SENIORS APPLYING TO PRIVATE and OUT-OF-STATE CAMPUSES

Following is the CURRENT procedure for requesting transcripts and counselor recommendations:

1. Bring the completed student and parent parts of the Brag packet to your counselor. On each Teacher Input Form write a deadline date (10 working days) by "Please Return to Counselor" and distribute them to selected teachers. Please write teacher name on form.
2. Complete the student portion of each college/university Secondary School Report form. (if applicable)
3. Complete and submit an **addressed, stamped envelope** for each college/university. Please put two stamps on each envelope that requires paper copies.
4. Complete the attached RBHS College Information Form.
5. Put all parts from items 2-4 in a folder and bring the folder to your counselor's office. This must occur **a minimum of ten working days** before the first Secondary School Report is due.
6. The deadline is **December 1, 2009** for all Secondary School Report forms and transcripts that are due to campuses before January 15, 2010.
7. Submit an official transcript to each college/university you are applying to. Go to RBHS.org, click on "transcript" then click ***Docufide*** and follow instructions.
8. Mid-Year Report forms are due to your counselor's Office before the end of first semester. They must be accompanied by an addressed envelope, with **two** stamp per envelope, unless filed online for common application.
9. Scholarship applications may also require a recommendation from your counselor and transcript. Please adhere to the above time lines, transcript through ***Docufide***. Talk to your counselor, in sufficient time, about a letter of recommendation if it is required.

Two weeks notice must be given to your counselor on all letters of recommendation needed for scholarships, too.

RBHS College Information Form

Student's Name: _____

Date: _____

Name of College/University	Deadline Date	Transcript Sent (Y or N)	Secondary School Report (Y or N)	Counseling Ltr of Rec (Y or N)	Date Mailed

Signature

PLEASE GIVE:

- (1) ONE COPY TO GIVE YOUR COUNSELOR**