

**UNIVERSITY OF DELAWARE
UPWARD BOUND MATH/SCIENCE**

CONFIDENTIAL

COUNSELOR RECOMMENDATION FORM FOR UPWARD BOUND MATH/SCIENCE

The student noted below has applied to the Upward Bound Math/Science program at the UNIVERSITY OF DELAWARE. Please assess the student in the following areas. In making your assessment, compare this student with other students of similar levels of experience and education.

Student: _____
(Name) *(School)*

Counselor: _____
(Name) *(School Phone)* *(Email)*

Current GPA: _____ **GPA Scale:** _____

PSAT: Verbal _____ **Written** _____ **Math** _____

STUDENT GRADE REPORT/TRANSCRIPT MUST BE ATTACHED

The U.S. Department of Education requires us to include the following information for each student in our Annual Performance Report.

1. Did this student meet the 10th-12th grade State Academic Achievement Standard in Reading/language arts?
 - Yes, student met standard. The grade level the student was most recently assessed was: _____
 - No, student did not meet standard
 - Not applicable, student did not take the assessment test

2. Did this student meet the 10th-12th grade State Academic Achievement Standard in Math?
 - Yes, student met standard. The grade level the student was most recently assessed was: _____
 - No, student did not meet standard
 - Not applicable, student did not take the assessment test

	1	<i>POOR</i> _____	2	3	4	5	<i>EXCELLENT</i>	
Overall academic potential:	1		2		3		4	5
Motivation:	1		2		3		4	5
Self-discipline:	1		2		3		4	5
Self-reliance:	1		2		3		4	5
Perseverance:	1		2		3		4	5
Cooperativeness:	1		2		3		4	5
Ability to get along with others:	1		2		3		4	5
Regard for rules/regulations:	1		2		3		4	5
Math/science ability:	1		2		3		4	5

Your overall assessment of this student:

- Highly recommend*
- Recommend with reservation*
- Do not recommend*

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