

Moorestown High School
Moorestown, NJ 08057

PARENT COMMENTS AND OBSERVATIONS

Student's Name (Please Print) _____ Counselor _____

Parent's Name (Please Print) _____

Parent Signature _____

The purpose of this form is to obtain information which may be included in the counselor recommendation letter and/or secondary school report. Please feel free to use the reverse side or to attach an additional page.

- Describe personal qualities and characteristics (please include examples) that set the student apart from his or her peers.

- Describe any obstacles that your child may have overcome or any challenges he or she has managed well.

- Describe any areas of exceptional growth in your child during the past few years.

- Describe an accomplishment or an incident which made you especially proud of your son or daughter.

- Is there any additional information that you feel should be noted in the recommendation letter?

If your child has a disability or other special need, do we have permission to disclose this information in the counselor recommendation?

Check here, If "Yes"

(This form is available for download from the MHS Guidance website via www.mtps.com under "Handbooks & Forms")