
**The Oklahoma School of Science and Mathematics,
Indian Capital Technology Regional Centers**
Counselor Recommendation

TO THE APPLICANT

Print or type your name and social security number in the space below and give this form to your Counselor. Your Counselor may either return this form to you in a sealed envelope to be submitted with your application or, if preferred, mail the completed recommendation directly to us.

All application materials must be received by Thursday, March 31, 2011.

Name of Applicant: _____

TO THE COUNSELOR

This student is applying for admission to The Oklahoma School of Science and Mathematics, Indian Capital Technology Regional Centers. In order to consider the students carefully, we ask the professional educators who have worked with them to evaluate their strengths and weaknesses, both as a student and as a person.

Your candid assessment of this student's potential for success at OSSM is extremely valuable to the admissions process. This information will be held in strict confidence.

This recommendation may be returned to the student in a sealed envelope or it may be mailed directly to:

OSSM-Tahlequah Regional Center
240 Vo-Tech Road
Tahlequah, OK 74464

-OR-

OSSM-Muskogee Regional Center
2403 North 41st Street East
Muskogee, OK 74403

All application material must be received by Thursday, March 31, 2011.

If you have any questions regarding the application procedure, contact Gil Brown at: (918) 456-2594, ext. 256, or gilb@ictctech.com for the Tahlequah, Stilwell Campuses or Ralph Harker at: (800) 375-8324, ext 7955 or ralphh@ictctech.com for the Muskogee, Sallisaw Campuses.

Counselor's Name (please print): _____

Signature: _____ Date: _____

School: _____

Address: _____

COUNSELOR

1. Please note which of the following phrases best describes the applicant.

Overall, how would you compare the applicant to his/her entire class?

<input type="checkbox"/> average or below	<input type="checkbox"/> good	<input type="checkbox"/> excellent (top 10% this yr.)	<input type="checkbox"/> outstanding (top 5% this yr.)	<input type="checkbox"/> one of the top few students I have met in my career of _____ years.
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Industry and Initiative

<input type="checkbox"/> no basis for judgment	<input type="checkbox"/> needs constant pressure; vacillates	<input type="checkbox"/> meets basic requirements	<input type="checkbox"/> conscientious but not inspired or challenged	<input type="checkbox"/> genuine eagerness to learn
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Work Habits

<input type="checkbox"/> no basis for judgment	<input type="checkbox"/> indifferent, careless	<input type="checkbox"/> needs frequent prodding; usually completes	<input type="checkbox"/> complete but not thorough or organized work	<input type="checkbox"/> well organized; thorough & complete work assignments
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Relation of Achievement to Ability

<input type="checkbox"/> no basis for judgment	<input type="checkbox"/> achievement far below capacity	<input type="checkbox"/> irregular achievement pattern; has not yet been challenged	<input type="checkbox"/> generally achieves to capacity	<input type="checkbox"/> achievement consistent with capacity
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Science/Mathematics Interest and Aptitude

<input type="checkbox"/> no basis for judgment	<input type="checkbox"/> little interest	<input type="checkbox"/> meets basic requirements	<input type="checkbox"/> generally interested but doesn't probe	<input type="checkbox"/> exceptional interest; critical & questioning attitude
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Personal Maturity

<input type="checkbox"/> no basis for judgment	<input type="checkbox"/> immature, unreliable, often in trouble	<input type="checkbox"/> cooperates only when serves personal interest; makes excuses	<input type="checkbox"/> appropriate for age, well mannered, generally cooperative	<input type="checkbox"/> exceptional; relates to people with genuine concern & interest
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Leadership

<input type="checkbox"/> no basis for judgment	<input type="checkbox"/> negative influence as a leader	<input type="checkbox"/> always a follower	<input type="checkbox"/> capable of leadership but does not initiate role	<input type="checkbox"/> positive influence; leader; sets tone & takes responsibility
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Associations

<input type="checkbox"/> no basis for judgment	<input type="checkbox"/> friends are unwholesome & troublesome	<input type="checkbox"/> few close friends; a loner	<input type="checkbox"/> friends are wholesome but not outstanding	<input type="checkbox"/> friends are academically inclined; seeks intellectual peers, class leaders
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2. Does your school offer honors or accelerated courses or programs? Yes No

If yes, how are students identified for participation in these courses or programs?

Is this student currently enrolled in honors courses? Yes No

If yes, which one or ones?

Instructions: PLEASE DO NOT USE the APPLICANT'S LAST NAME, the NAME OF YOUR SCHOOL or TOWN in your response to the following questions.

3. When you first think of this student, what words immediately come to mind?

4. How long have you known this student and in what capacity?

5. Please give an overall evaluation of the student's potential for success at The Oklahoma School of Science and Mathematics, Indian Capital Technology Regional Centers. Comment on the student's maturity, adaptability to new situations and any other additional information that might prove helpful.

6. Is there anything else we should know about this student (e.g., personal circumstances, obstacles that the student has had to overcome in pursuing his or her educational goals?)