



PARENT/GUARDIAN QUESTIONNAIRE

Name of Student:

Parent/Guardian:

Parent Email:

1. What are the first things that come to mind to describe your daughter/son?

2. In what areas has your child shown most development and growth during the past three or four years?

3. Please describe any personal challenges, unusual circumstances or difficult experiences that your daughter/son has faced, particularly in high school, which may have affected her/his academic growth.

4. Name your daughter/son's most outstanding accomplishment over the past 3-4 years?

5. Does your daughter/son have any interests, hobbies, projects that might not be visible to SHS? Please explain.

6. Please feel free to make any additional comments about your child or express concerns you may have about the college process (financial, personal, etc.).

7. Is there a parent/guardian in the household that has military and/or veteran status?

Yes No

8. Do we have your permission to include the information you have provided here in the counselor's letter of recommendation written on behalf of you daughter/son?

Yes No

***Please note:** There is no guarantee that the information you have provided will be included in the counselor's letter.

Parent/Guardian Signature: _____ **Date:** _____

(Return this form to the Guidance Department by 3/1/19)