PEER OR SIBLING COMMENTS FOR COUNSELOR RECOMMENDATION

Name:
Return form to:
Return form to: (counselor's name)
Return by:(Allow peer at least two weeks to complete)
QUALITY EXAMPLES ARE MOST HELPFUL
How long have you known this student and what is your relationship to them?
What do you consider this student's strengths and weaknesses to be?
Why do you like to be around this person?