ATTENTION: GUIDANCE COUNSELOR RECOMMENDATION FORM

Upward Bound Program
Benedict College

(Confidential)

TO:	Guidance Counselor		
FROM:	Director of Upward Bound		
SUBJECT:	Student Recommendation		
		has made application for admission to the	
Benedict Col	llege Upward Bound Progra	m. Please complete this form and mail to Upward	
		SC 1070, 1600 Harden Street, Columbia, SC 29204	
	you have any questions. The	.edu. Please contact the Program office at (803) ank you.	
Applicant's Gl	PA as of	(date) (Please attach a copy of student's transcript)	
Did student pa	ass the EOCEP (if applicable)?	Yes No	
Test Scores: 1	Math Score	ELA Score Science Score	
Check area tha	at best describes applicant's ac	ademic track:	
General	_ Tech-Prep College F	Prep Other (specify)	
Does the stude	ent have an IEP or Resource R	oom in place? Yes No	
Applicant's At	ttendance Record: Good	Fair Poor	
Please check t	he areas that student needs to	develop:	
Math	Science	Social Science Study Skills	
Social Skills _	Self-image	Communication Skills Cultural Enrichment	
Other (please	specify)		_
Do you recom	amend this student to participat	te in Upward Bound? Yes No	_
GENERAL C	OMMENTS:		_
Counselor Sig	nature	Date	
School		Phone	