

BETHPAGE HIGH SCHOOL  
GUIDANCE DEPARTMENT  
10 Cherry Avenue  
Bethpage, NY 11714  
Phone: (516) 644-4120  
Fax: (516) 644-4129

STUDENT BRAG SHEET

Please complete this form as completely and honestly as you can. You don't have to answer a question if you feel it doesn't apply to you. If there is anything that you would like your counselor to include in a recommendation letter that you feel is important for the colleges to know about you, please feel free to add additional information. You can add additional sheets if necessary.

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Name \_\_\_\_\_ Counselor \_\_\_\_\_

1. Has any summer activity, internship, job and/or volunteer experience been of significance to you? Why?
2. Do you have any hobbies or specific interests?
3. How would you describe yourself? What adjectives reflect your uniqueness?
4. What are your strengths?
5. How would your teachers describe you?
6. How would your family and friends describe you?
7. What do you consider your most significant **personal** achievement?
8. What do you consider your most significant **academic** achievement?
9. What type of work do you hope to be doing 10 years from now?
10. Are there any special circumstances, background information or other factors which may be relevant?

PLEASE RETURN THIS COMPLETED FORM TO YOUR COUNSELOR