

**THE UNIVERSITY OF TEXAS AT EL PASO**

**UPWARD BOUND PROGRAM**

Dear Student,

Please give this *Teacher Recommendation Form*, along with the enclosed return envelope, to a teacher at your school who instructs you in one of the following core subjects: English, math, social studies, or science. If you last attended middle school, you may give it to a teacher from that school. If you are currently attending high school, you may give it to your high school teacher. **Please ask them to fill out the form and return it to us in the enclosed, postage paid, self-addressed envelope.** Before giving the form to a teacher or a counselor, you should print your name, address, phone number, name of your high school, and student classification on the first and second lines, then sign and date the form.

**UTEP – UPWARD BOUND PROGRAM**  
**Teacher Recommendation for Student Participation in Upward Bound**

Student Name: \_\_\_\_\_ Address: \_\_\_\_\_  
(first) (last) (number) (street name)  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

School: \_\_\_\_\_ Student Classification: \_\_\_\_\_

Teacher Name: \_\_\_\_\_ Subject: \_\_\_\_\_

Length of time you have known student: \_\_\_\_\_

Upward Bound is a program designed to generate knowledge, skills and motivation for success in post secondary school. Participants should have the ability to succeed in post secondary school even though they may not now be demonstrating all of the characteristics of successful students. **Please rate this student by circling the appropriate response to these statements.**

**1-Strongly agree    2-Agree    3-Neither agree/disagree    4-Disagree    5-Strongly disagree**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Expresses interest in academic endeavors _____                        | 1 | 2 | 3 | 4 | 5 |
| 2. Demonstrates responsible behavior _____                               | 1 | 2 | 3 | 4 | 5 |
| 3. Relates well to peers _____   | 1 | 2 | 3 | 4 | 5 |
| 4. Cooperates with school staff _____                                    | 1 | 2 | 3 | 4 | 5 |
| 5. Is dependable and reliable _____                                      | 1 | 2 | 3 | 4 | 5 |
| 6. Would benefit from supplemental academic support and services _____   | 1 | 2 | 3 | 4 | 5 |
| 7. Needs expanded cultural awareness _____                               | 1 | 2 | 3 | 4 | 5 |
| 8. Would benefit from supplemental career guidance and information _____ | 1 | 2 | 3 | 4 | 5 |
| 9. Has good attendance/punctuality record _____                          | 1 | 2 | 3 | 4 | 5 |
| 10. Will be successful in college endeavors _____                        | 1 | 2 | 3 | 4 | 5 |

Additional comments: \_\_\_\_\_

SIGNATURE of Teacher/Counselor: \_\_\_\_\_ DATE: \_\_\_\_\_

This is an important part of the student's application for Upward Bound. Please return to us as soon as possible. Thank You.

**Student: Please read and sign the following statement before giving this form to your Teacher. Your Teacher will return this form to us in the enclosed postage paid, self addressed envelope.**

**"I hereby waive all rights to see this recommendation form when completed."**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_