

# South Dakota Teachers as Advisors Lesson Plan

## References & Recommendations

<b>Grade Level</b>	12 <sup>th</sup> Grade
<b>Goal/Objective</b>	Students will complete a recommendation form to give to their references.
<b>Minimum Time Required</b>	30 minutes
<b>Materials/Resources</b>	Reference List form (attached); Recommendation Form for References (attached)

**Step by Step Instructions:**

1. The students will discuss the importance of using references (for jobs, scholarships and post-secondary schools).
2. Have the students come up with a list of three to four people that knows them well and would give them a positive recommendation. Have them compile this information on the Reference List form.
3. They will need to ask permission to use them as a reference. They will ask for proper spelling of their name. They will also need the current address, position/title, and phone number.
4. Discuss what a letter of recommendation is used for (to obtain a job, apply for a scholarship or award).
5. Have the students complete a recommendation form for references that can then be given to a reference to complete a letter of recommendation for scholarships, jobs, and etc. The personal involvement/activity form could be attached to this so that they reference is away of their involvement.

**Evaluation of Activity for Continued Success:**

<b>Domain/Standard</b>	Career
<b>Academic Standards</b>	
<b>Math</b>	
<b>Employability/SCANS Skills</b>	
<b>Assessment Rubric</b>	
<b>Credits for sources:</b>	Sherri Bruinsma

## REFERENCE LIST FORM

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Position/Title: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Position/Title: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Position/Title: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Position/Title: \_\_\_\_\_

**RECOMMENDATION REQUEST COVER FORM FOR REFERENCE**

Student Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Date: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Letter to be addressed :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Letter of recommendation will be used for:

\_\_\_\_\_  
\_\_\_\_\_

Date to be completed: \_\_\_\_\_

Please return the letter of recommendation to (mark one)

Me: \_\_\_\_\_

Mail directly to whom the letter is to be addressed to: \_\_\_\_\_