## **WORTHING EARLY COLLEGE HIGH SCHOOL**

9215 Scott St. Houston, Texas 77051

## **Counselor Recommendation Form**

Student Name	Cur	Current School			
Please complete this section in its entirety along with a copy of the students' last rep	. •	- ,	gh Scho	ool,	
Number of unexcused absences t	his school year?	Reason:	ason:		
Number of discipline ref <mark>erral</mark> s this	s school year?				
Has this student taken any course		If so, please list.			
Has this student participated in a	n AVID program?		Yes	No	
Economica <mark>lly Disadva</mark> ntaged Stat	us:		Yes	No	
Is this student an English Languag (If yes, attach a copy of the latest			Yes	No	
Is this student <mark>Gifted and Talente</mark>	d?		Yes	No	
Is this student in Special Education (If yes, a copy of the IEP must be a			Yes	No	
Is this a 504 student? (If yes, please attach a copy of the	accommodation plan)		Yes	No	
Counselor Name (print and signature)	Email Address				

Counselor Forms may be scanned and emailed to: Teri Hampton, Dean of WECHS 713.733.3433

Date