

**\*\*The guidance department can not hold college conferences or process college applications until this packet is returned. This packet must be returned by January 25, 2010, at which point your child may schedule a college conference.**

**PARENT**  
**DARIEN HIGH SCHOOL**  
**COLLEGE PACKET**

*Dear Parents,*

*This is your opportunity to tell us about your child. What makes them unique? Because you know your child best, please share your thoughts about your son or daughter by answering the following questions or write a letter. Your responses will be a valuable resource next fall when your child's counselor writes their college recommendation letter. If you use additional paper, be sure to include your child's name on the top.*

*Sincerely,  
DHS Guidance Department*

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**PART 1: Student Profile**

**Describe one or two major events that you see as turning points in your son/daughter's development and explain why you view them as such.**

**His/her high school career has been pleasurable and/or painful because...(Please feel free to write about both aspects).**

Name of Student \_\_\_\_\_ Class of 2011 Counselor \_\_\_\_\_

What I (we) would like the college admissions staff to know about my son/daughter is...

His/her greatest strength:

His/her greatest weakness:

Is there anything you wish to add which would help in writing the counselor's recommendation letter for colleges? (eg. legacy, special family situations, special medical history, family trauma, etc.)

Does your child receive services for a disability?    Yes    No

If yes, do you give permission for this information to be included in a letter of recommendation?  
Circle one.

Yes                      No

**PART 2: College Search Criteria**

**LOCATION**

Do you have a specific location in mind for your child? (e.g. New England, East Coast, Midwest, West Coast, small town, big city, etc.)

Do you think your child has a certain location in mind? If so, what?

Name of Student \_\_\_\_\_ Class of 2011 Counselor \_\_\_\_\_

**COLLEGE SIZE/STUDENT BODY**

**In what size college would your child be most successful? Circle one.**

Small college (under 3,000 students)      Medium college (3,000-10,000)      Large college (10,000+ students)

**Would you consider a single-sex school for your child?**

**Do you prefer a school with a religious affiliation and/or a strong majority of one religious group?  
If so, which one?**

**Do you think a school could be too conservative or too liberal? What atmosphere would you like to see at your child's college?**

**ACADEMICS**

**Does your child have a career goal in mind? If so what?**

**What other academic areas would you like your son or daughter to consider?**

**Are there any special academic programs or services that you would like to have available to your child in college?**

**EXTRACURRICULARS**

**Are there extracurricular programs that you would like to have available to your child in college?**

**ATHLETICS**

**Is your child going to be a recruited athlete? If so, what sport? Who is their coach?**

Name of Student \_\_\_\_\_ Class of 2011 Counselor \_\_\_\_\_

**FINANCES**

Will cost influence where your child attends college? Are you planning to apply for need-based financial aid? Will merit-based scholarships be critical?

**ADMISSIONS**

Do you think it is important to your child that he /she attend a prestigious “big name” institution? How important is it to you?

Are there aspects of the college search and selection process that are likely to cause family friction? If yes, what are they?

List the colleges and universities that you and your child are presently considering. Please indicate which ones you have visited.

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Parent signature \_\_\_\_\_ Date \_\_\_\_\_

**PART 3: Student Data**

*The information requested below will be seen only by the counselor and will be treated with discretion.*

STUDENT LEGAL NAME:	<div style="display: flex; justify-content: space-between; font-size: small;"> <span><i>Last</i></span> <span><i>First</i></span> <span><i>Middle</i></span> </div>	NICKNAME:	SEX:
HOME ADDRESS:			
BIRTHPLACE:	SS#	HOME PHONE:	
E-MAIL ADDRESS:			
CITIZENSHIP:	<input type="checkbox"/> United States	<input type="checkbox"/> Other Country:	
LIST SCHOOLS STUDENT HAS ATTENDED		LOCATION	YEARS OF ATTENDANCE

Please **CIRCLE** all that apply:

Parents are: divorced / married / separated      father / mother is deceased      Student lives with:

<b>FATHER</b>	<b>MOTHER</b>
Name: _____	Name: _____
Occupation: _____	Occupation: _____
Company: _____	Company: _____
Business Address: _____	Business Address: _____
E-Mail Address: _____	E-Mail Address: _____
High School Attended: _____	High School Attended: _____
College(s) Attended: _____	College(s) Attended: _____
Number of Yrs. Attended: _____	Number of Yrs. Attended: _____

Names of Siblings	Last School Attended	Total Years Education

**ATTENDANCE / HEALTH RECORD: Has your child ever been absent from school for a long time in any one school year?**

When? \_\_\_\_\_ How Long? \_\_\_\_\_ Why? \_\_\_\_\_  
**Does your child have any chronic health problems? If yes, please explain:**

**Do you wish this to be discussed in the counselor recommendation letter?**

Parent signature \_\_\_\_\_ Date \_\_\_\_\_