




Teacher Recommendation Request Form

Date Received from Student _____

Student Name: _____

Teacher Name: _____

Name of College/University	Application Deadline Date	Do you need the letter mailed? (Write Y if your college has a stamp icon in Naviance) 	Are you using the Common Application? (Y or N)	For Teacher Use: Date Letter Sent

Teachers: Don't forget to complete Teacher Common Application Form prior to letter being submitted.

Release of Student Records

The law requires that schools receive written permission signed by the parent/guardian before transcripts and other student records can be released to a third party. I have completed the Wavier of Right to Access Teacher Letters of Recommendation Form and have ☐ waived my rights ☐ not waived my rights to examine a copy of the letter. I give approval to have transcripts and other student records sent by U.S. Mail or transmitted electronically to those listed above when a request to do so is made by my son/daughter.

Signature of Parent/Guardian: _____ Date: ____/____/____

Student Signature: _____ Date: ____/____/____

Note for teachers: If a student requests additional recommendations from colleges not on this list, they must provide you with another Teacher Recommendation Request Form with appropriate signatures.

5.20 HCPSS Office of School Counseling and Related Services.NH