




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

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: ____/____/____