MANHASSET HIGH SCHOOL COUNSELING CENTER

RESEARCH COMPETITIONS

Print Student Name:		Grade:	Grade:	
Place a check before each it	em you are requir	ed to send as part of your applica	ition.	
Current Transcript				
First Quarter Grade	S			
First Semester Grad	les			
Please release the informat	ion indicated belov	w to the following program:		
Name of Program:				
			<u>-</u>	
Address:				
*Please note – If required, of College Board (www.college		or ACT scores must be forwarded e ACT (<u>www.act.org</u>)	directly from the	
*The documer	it(s) requested abo	ove are for a Research Competiti	on and must be:	
Returned to the Ma	th Research Coord	inator		
Returned to the Scie	ence Research Coo	rdinator		
Returned to the Soc	ial Science Researc	ch Coordinator		
Student Signature	Date	Parent/Guardian Signature	Date	
Counseling Center Use Only:	Date Received	Date Sent		