

RECOMMENDATION WAIVER REQUEST

HIGHLAND PARK HIGH SCHOOL

REQUEST FOR TEACHER RECOMMENDATION FOR COLLEGE APPLICATION/SCHOLARSHIP

TO THE STUDENT: This form is only to be used if the college does not provide a teacher recommendation form. This form must also accompany a stamped/addressed envelope to the Office of Admissions. Do not use this form for the Common Application or if the recommendation is to be submitted electronically.

TO THE RECOMMENDER: Please attach this form to your letter of recommendation.

Student Name (print) _____ ID# _____ Date of request _____

College/scholarship for which a recommendation is being requested: (please print complete name)

NAME OF COLLEGE/SCHOLARSHIP	APPLICATION DEADLINE

Under the provisions of the Family Educational Rights and Privacy Act of 1974 and state law, you have the right to review your educational records at Highland Park High School and at any college to which you matriculate. The act further provides that you may waive your right to see recommendations for college admissions. Please check the appropriate box indicating whether or not you wish to waive this right and then sign your name.

I waive I do not waive

any right of access that I may have to the recommendations prepared by _____
(name of HPHS staff member)

Student Signature _____ Parent Signature _____

(required if student is under 18)

07/12