Haddam-Killingworth High School

TRANSCRIPT REQUEST FORM-FOR SUBMITTED COLLEGES

Student Name:_____ Date Received_____

Counselor: Baerlein ☐ Myers ☐ Stone ☐ **(School Counseling Office Use Only)**

Name(s) of teacher and or counselor (s) writing you a recommendation: (1)_____ (2)_____

ONLY REQUEST TWO LETTERS (FROM TEACHERS) OF RECOMMENDATION IF REQUIRED BY COLLEGE(S)

ATTENTION STUDENTS: Your applications **CANNOT** be processed without these steps completed.

- ☐ Submitted your completed application and payment?
- ☐ Filled out your FERPA waiver on the Common Application and "matched" your Common Application with your Naviance account?
- ☐ Listed the schools to where you have applied (see below)
- ☐ Sent required SAT/ACT/Subject Test scores **directly to my college(s) from the College Board/ACT? (This is the student's responsibility).**
- ☐ Spoken with teachers that I am requesting recommendations and confirmed with a request e-mail in Naviance?
- ☐ Posted Candidate Biography Form on Naviance? (**Counselors require these forms prior to writing a letter of recommendations**).

College/Institution **(Please include City and State where College is located)**	Application Deadline	*Application Type	SUBMISSION METHOD (Must Check One) Common App	Other	Teachers Recommendations to Send (please list in order of preference)
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*Application Type: Please indicate Early Action (EA), Early Decision (ED), Regular Decision (RD), Rolling (R), etc.

Please note once this completed form has been submitted the counseling office has up to ***10 school days to process your request***

I give my permission for Haddam-Killingworth High School to release my child's transcript and teacher/counselor recommendations to the above named colleges/institutions.

Parent/Guardian Signature_____ Date_____

Parent/Guardian Printed Name_____