**Great Neck South High School**

**Teacher College Recommendation Request Form**

**Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Teacher Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Received :\_\_\_\_\_\_\_\_\_\_\_\_\_FERPA Waiver Completed (on reverse side)\_\_\_\_\_\_\_**

**Student Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Counselor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FOR TEACHER’S ONLY**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of College** | **ED/EA**  **Rolling**  **Regular** | **Deadline DATE** | **Which**  **Application**  **Used** | **NON Common App Schools Electronic or Mail?**  **( Self-Addressed, Postage-Paid Envelope attached if not electronic)** | **Electronic**  **or Mail** | **Date Processed** |
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**DEADLINE INFORMATION**

|  |  |
| --- | --- |
| **College Deadline** | **Counselor/Teacher Deadline** |
| **November 1, 2017** | **Monday, October 16, 2017** |
| **November 15, 2017** | **Wednesday, October 25, 2017** |
| **January 1, 2018** | **Monday, December 4, 2017** |

**For Teachers: Minimum of FIFTEEN (15) school days required for any deadlines not indicated above.**

**Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**College Application & Transcript Release Form**