Senior Information Sheet

Student's Full Name _____

Home Address _____

Email Address _____ Date of Birth _____

All college recommendations are confidential in nature. Therefore, we ask that you sign below BEFORE asking your counselor to complete your college recommendation letter. A parent or guardian signature is required if you are not yet 18 years of age.

- I give permission for my test scores/transcript to be released to the college(s) of my choice.
- I waive the right to see the recommendation submitted to the college(s) of my choice.

_____ _____

Student Signature Parent Signature

Colleges where you are applying: (Not etched in stone, just an idea……)

_____

_____

_____

_____

Intended Major(s)

_____

_____

Possible Career Choice(s)

_____

_____

List the names of the 2 teachers to whom you gave the Teacher Information Forms.

_____

_____