Plainview-Old Bethpage John F. Kennedy High School Guidance and Counseling Center

TEACHER RECOMMENDATION FORM

Student Name:			Date of Birth:				
Also please indicat	ne college i.e. e if you are	name, t Univers applyin	ype of app and ap sity of Tul. g through	applying to: clication (early decision, early application deadline sa, Early Action, November 15 th Common App., Coalition App., or see Student letter of recommendati	h directly to	the Co	
College/University Name ie: University of Tulsa	App. Type Com App, Coal, or Direct	App. Type ie:EA	App. Deadline ie:11/15	College/University Name	App Type Com App, Coal or Direct	App. Type	App. Deadline
1.				6.			
2.				7.			
3.				8.			
4.				9.			
5.				10.			
Please make sure yo	ou write the	e exact na	me of the s	 chool (ex. University at Buffalo or l	_ Buffalo Sta	te Colle	ege)
My Counselor is:							
** It is our expec started your app			•	mit this form to your teacher	that you	have <u>a</u>	<u>lready</u>
Student's Signature	e/ Date			_			