



Earl L. Vandermeulen High School

Teacher Recommendation Request

STUDENT'S NAME _____

TEACHER'S NAME/SUBJECT _____

I am requesting that the above teacher write a *confidential* letter of recommendation for me. I authorize Earl L. Vandermeulen High School to release all requested records and recommendations to colleges to which I am applying. I waive my right to review all recommendations and supporting documents submitted by me or on my behalf.

My earliest known application deadline is _____ at _____
(name of college/university)

I understand that it is my responsibility to ensure that the teacher listed above has all necessary documents/materials in order to complete their letter. I also understand that it is my sole responsibility to coordinate all deadlines with them and ensure their letter has been completed.

Student Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

Teacher Signature: _____ **Date:** _____