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CONESTOGA HIGH SCHOOL
TREDYFFRIN/EASTTOWN SCHOOL DISTRICT
200 IRISH ROAD • BERWYN, PA 19312-1260 • 610-240-1000

High School Transcript Release/Recommendation Waiver Form

Dear CHS Student and Parent/Guardian,

As you begin planning for the college application process, there are two important components we draw to your attention: college letters of recommendation and transcript release.

During the application process, many colleges and universities require letters of recommendation on your behalf. To maximize the effectiveness of the recommendations, it is our practice to receive signed consent from both the student and parents/guardians, waiving their rights to view the recommendation letter(s). Our objective in *strongly recommending* this waiver is to ensure that college admissions officers give the utmost weight to the recommendation(s). Colleges and universities have indicated that they value confidential recommendation letters more than those that have been reviewed by students and their parents/guardians. Additionally, not all schools require letters of recommendation and some schools request only one letter. It is in your best interest to send only what is asked for and not more.

Students are also asked to submit a current transcript as part of the application process. In a previous mailing, students and parents/guardians were given an opportunity to review transcripts for accuracy and to notify the Registrar if corrections were needed. We have implemented this process to help ensure that current transcripts are accurate when sent to schools. If you have not already done so, please review your transcript and speak with the Registrar if you believe changes are needed. Your signature below permits Conestoga to release your transcript to requested colleges and universities.

Please take a moment to complete the form below and return it to your assigned counselor. If you have additional questions about this process, please speak with your counselor. We wish you all the best in the application process and we look forward to supporting in your endeavors throughout the school year.

Sincerely,

Conestoga Student Services Department

High School Transcript Release/Recommendation Waiver Form

I _____ waive my right to view the recommendation(s) written on my behalf. .

I, _____ give Conestoga High School staff members permission to release my transcript to requested colleges and universities.

Student signature _____

Parent signature _____

Date _____