

Document Request Form

Student Name: _____

Date Submitted: _____

Counselor Name: _____

Due to the large volume of requests for documents to be sent to outside organizations, students must submit the Document Request Form to the Counseling Department at least one week prior to any deadline. Any request requiring a **new** letter of recommendation should be submitted at least **THREE WEEKS** prior to any deadline date.

Scholarship/Organization Name and Contact Information (if applicable):

Deadline: _____

Materials Needed:

Transcript _____

Counselor Letter of Recommendation _____

Teacher Letter(s) of Recommendation _____

Unofficial SAT/ACT Scores _____

Other (please describe): _____

Student signature : _____ Date: _____
(if items picked up by student)

Please note: Letters of recommendation are confidential. Therefore, when an organization requires that a letter is not sent directly by the recommender, the student is responsible for gathering all other materials first so that the letter can be placed last into the sealed envelope.

Counselor Use Only:

Date Processed:

Initials: