

# PARK HIGH SCHOOL RECOMMENDATION REQUEST

To: \_\_\_\_\_ (Faculty member) From: \_\_\_\_\_ (Student)

Re: \_\_\_\_\_  
(Full name of college or scholarship)

Today's Date: \_\_\_\_\_

Note to Student:

Allow 2 WEEKS between  
today's date and the due date!

Recommendation Due Date: \_\_\_\_\_

This date is a: *(check one)*

- Must-be-received-by date  
 Postmark date  
 I'm not sure

Check ALL that apply:

- Use the enclosed recommendation form.  
 No special recommendation form needed. Please use Park High School letterhead.  
 Return the recommendation to me in a sealed envelope with your signature across the seal.  
 Addressed, stamped envelope attached.  
 This recommendation must be completed online. I have attached the information you need in order to access the recommendation.

**NOTE TO STUDENT: Be sure to attach your resume and/or a copy of your "Student Information for Recommendations" form to this request.**

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