



# GARDEN SCHOOL

Jackson Heights, New York

Richard Marotta, *Ph. D.*, Headmaster

## College Letter Request Form Class of 2017

Student Name \_\_\_\_\_

Teacher Name \_\_\_\_\_

By signing this form, the student agrees that he or she will notify the recommender of any plans to apply to any college under any early decision, early action or priority deadline plans by 10/3/16.

Student Signature \_\_\_\_\_

By signing this form, the teacher agrees that he or she will write a letter of recommendation for the student.

Teacher Signature \_\_\_\_\_

Return 2 copies to Ms Sohmer by September 26