

Biotechnology High School



Excellence is in our DNA

#1 High School in New Jersey (2014 US News & World Report)



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Letter of Recommendation Request Form

Monday 5/4/15 is Priority Request Day for students that have worked with teachers through clubs, projects or other extension activities.

From Tuesday 5/5/15 through Friday 5/8/15: All students may ask any teacher for a recommendation letter

Letter 1

Student Name: _____

Teacher Name: _____

I hereby waive the right to view my letter of recommendation written by this faculty member and understand that I will not see any recommendations or evaluations submitted for me.

Student Signature: _____

Date: _____

Teacher Signature: _____

Date: _____

Letter 2

Student Name: _____

Teacher Name: _____

I hereby waive the right to view my letter of recommendation written by this faculty member and understand that I will not see any recommendations or evaluations submitted for me.

Student Signature: _____

Date: _____

Teacher Signature: _____

Date: _____

PLEASE PUT THIS COMPLETED FORM IN YOUR COUNSELOR'S MAILBOX BY FRIDAY 5/8/15