



# GOFFSTOWN HIGH SCHOOL COLLEGE APPLICATION REQUEST FOR RECORDS

## RECORDS REQUEST FROM GUIDANCE TO THE FOLLOWING COLLEGE:

(COLLEGE NAME & ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICATION DEADLINE: \_\_\_\_\_

Your Signature gives Goffstown High School permission to provide the above college/university information they will need throughout your application process.

\_\_\_\_\_  
Student name (print)

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

PLEASE INDICATE THE TEACHER(S) YOU PLAN TO ASK FOR LETTERS OF RECOMMENDATION:

\_\_\_\_\_  
\_\_\_\_\_

**THERE IS A \$3.00 PROCESSING FEE FOR ALL FOUR-YEAR, NON-COMMON APP SCHOOLS AND FOR TWO-YEAR COMMUNITY COLLEGES NOT SUBMITTED ON-LINE.**

## GUIDANCE DEPARTMENT CHECK LIST:

### SENT

- 🍏 Goffstown High School Profile
- 🍏 Official Transcript
- 🍏 Report Card (quarter / mid-term)
- 🍏 Senior year academic schedule
- 🍏 Counselor recommendation
- 🍏 College Secondary School Report
- 🍏 Teacher recommendations:  
\_\_\_\_\_
- 🍏 \_\_\_\_\_
- 🍏 Application                      🍏 Completed on-line
- 🍏 Application fee                 🍏 Remitted on-line

<b>Payment Received:</b>
Check # _____
Cash _____
Rcvd. By _____

Packet sent out on: \_\_\_\_\_