



# High School Partnership Program Letter of Recommendation

The HSPP Coordinator/School Counselor must complete, sign, date and mail the letter of recommendation to: Mariah Thomas, Admissions, Manchester Community College, MS #12, P.O. Box 1046, Manchester, CT 06045-1046. The Spring 2021 deadline is December 14.

## HSPP COORDINATOR INFORMATION

First Name	MI	Last Name	Position/Title
High School Name			
High School Street Address/City/State/Zip			
Coordinator Phone Number		Coordinator Email	

## HIGH SCHOOL STUDENT(S) RECOMMENDED FOR HSPP

As the HSPP Coordinator/School Counselor for my high school, I certify that the student(s) listed below meets the qualifications for the High School Partnership Program, attend the high school (listed above), is a high school junior or senior and has maintained a high school cumulative grade point average of B or above.

Student Name	Birth Date	Term <input type="checkbox"/> Fall <input type="checkbox"/> Spring	Year
Student Name	Birth Date	Term <input type="checkbox"/> Fall <input type="checkbox"/> Spring	Year
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Student Name	Birth Date	Term <input type="checkbox"/> Fall <input type="checkbox"/> Spring	Year

## REQUIRED

I understand that, in order to accept a student into the High School Partnership Program, a current completed and signed recommendation form, MCC HSPP Admissions Application and HSPP Class Registration form must be submitted for each student. I will submit an authorized, new letter of recommendation, as required each semester, to the Admissions office.

Signature: HSPP Coordinator/School Counselor (Approval)	Date
Signature: MCC Associate Director of Admissions or Designee	Date

**For questions about HSPP, please contact Interim Associate Director of Admissions Mariah Thomas, at 860-512-3214 or [mthomas@manchestercc.edu](mailto:mthomas@manchestercc.edu)**