HINGHAM MIDDLE SCHOOL COUNSELING DEPARTMENT

Director K - 12 Heather Rodríguez



Counselors Christine Sherman Suzanne Darling Nina McGrath Michelle Woodard

Private School Application Process

Hingham Middle School counselors and staff are happy to assist families who wish to submit applications to private schools. In order to best assist our families and manage the great volume of information that must be shared as part of this process, Hingham Middle School has instituted a standardized process for requesting school records and recommendations. We encourage families to communicate their intention to complete the private school application process as early as possible. We look forward to working with families through this process.

The process is as follows:

- 1. Notify HMS counselors of your intent to submit private school applications, in writing, as soon as possible.
- 2. Contact teachers to request a recommendation at least 15 school days prior to the first deadline.
- 3. Complete and submit a signed Records Release Form to your school counselor at least 15 school days prior to the first deadline*.
- 4. Students should complete and submit the Private School Student Questionnaire to their school counselor.

* Most private school applications are completed electronically. However, If a school requires a paper application please submit the signed application form and a business-sized envelope with two stamps. Please note: large manilla envelopes require an additional stamp.

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Records Release Form

To ensure timely submission of school documents, this form should be submitted to the HMS School Counseling Office <u>at least 15 school days prior</u> to the first private school application deadline.

I authorize Hingham Middle School to release the following records to the schools listed below:

- Current year report card
- Transcript or final report card from the previous two academic years
- Standardized testing
- Attendance report
- Discipline record, if applicable

Name of School(s)		Application Deadline(s)	Date Transmitted (office use only)
Student's Name:	YOG:		 ounselor:
Parent/Guardian Signature		Date	

OFFICE USE ONLY DATE RECEIVED: _



Student Questionnaire

Student: _____

Counselor: _____

Please complete and return this form to your School Counselor ASAP. You are welcome to submit typed responses or use extra paper as necessary. Thank you!

What is your favorite subject? Why?

How would you describe yourself as a student? What are your strengths?

What are some highlights of your HMS experience?

What are your future goals?

Leadership roles/community service activities:

Extracurricular activities:

Three words that describe you:

Additional information you would like reflected in your recommendation: