

**Bergen County Academies**  
**Summer/Special Program Processing Request Form**

*This form must be submitted at least 3 weeks prior to the deadline to Mrs. Spinella (The Commons - room 112) or Ms. Ross (The College Center - room 116).*

Student's Name \_\_\_\_\_ Date of Request \_\_\_\_\_  
Counselor \_\_\_\_\_ Academy \_\_\_\_\_ Class of \_\_\_\_\_  
Deadline: \_\_\_\_\_

Name of Program \_\_\_\_\_  
Address \_\_\_\_\_

Include the following items: (Check all that apply)

\_\_\_\_\_ application \_\_\_\_\_ transcript \_\_\_\_\_ counselor letter \_\_\_\_\_ teacher letter(s) 1. \_\_\_\_\_ 2. \_\_\_\_\_

*If there is a form that your counselor needs to fill out, please check here \_\_\_\_\_ and attach it.  
If you are inviting them to fill out the form online, please check here \_\_\_\_\_.*

Notes/Comments \_\_\_\_\_

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

**\*Student is responsible for mailing any items not submitted with this request. No additions can be made.**

---

**Bergen County Academies**  
**Summer/Special Program Processing Request Form**

*This form must be submitted at least 3 weeks prior to the deadline to Mrs. Spinella (The Commons - room 112) or Ms. Ross (The College Center - room 116).*

Student's Name \_\_\_\_\_ Date of Request \_\_\_\_\_  
Counselor \_\_\_\_\_ Academy \_\_\_\_\_ Class of \_\_\_\_\_  
Deadline: \_\_\_\_\_

Name of Program \_\_\_\_\_  
Address \_\_\_\_\_

Include the following items: (Check all that apply)

\_\_\_\_\_ application \_\_\_\_\_ transcript \_\_\_\_\_ counselor letter \_\_\_\_\_ teacher letter(s) 1. \_\_\_\_\_ 2. \_\_\_\_\_

*If there is a form that your counselor needs to fill out, please check here \_\_\_\_\_ and attach it.  
If you are inviting them to fill out the form online, please check here \_\_\_\_\_.*

Notes/Comments \_\_\_\_\_

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

**\*Student is responsible for mailing any items not submitted with this request. No additions can be made.**