



Information Technology High School  
21-16 44th Road  
Long Island City, NY 11101  
Phone: 718-937-4270 Fax: 718-937-5236

Jean D. Woods-Powell,  
Principal

Assistant Principals  
Natalie Bousigard-Hyde  
Bienvenido Hernandez  
Kenneth Ojeda  
Elicia Rodriguez-Felix  
Cherry Sambrano

**REQUEST FOR FACE-TO-FACE LETTER**

**Directions:** Please complete and allow up to 3 days for your request to be completed. You will be called once it is complete and then the parent or guardian that is named on this request must pick up the letter in person with their Photo ID.

Today's date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Telephone # \_\_\_\_\_

Child's Name: \_\_\_\_\_ ID#: \_\_\_\_\_

**Reason for Face to Face Letter: (Please circle one)**

Housing    Human Resources (Food Stamps)

Insurance                                        Immigration

Medicaid

IRS (please indicate for which year) \_\_\_\_\_

If for any other reason, please indicate below:

\_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

**\*Once you have received a call that your letter is ready you may pick up your letter in the Main Office or Room 303 from 09:00 am – 12:00 pm. Thank you.**