



TRANSCRIPT/STUDENT RECORDS REQUEST

Student Name: _____ Date of Birth: _____ Graduation Year: _____

Phone: _____ Counselor: _____ E-Mail Address: _____

Teacher(s) Writing Your Letters of Recommendation: _____

College/University, Armed Forces, Scholarship, Employer, Trade/Technical School, NCAA, Internship Program, Other (List Below)	City in which the college is located	Application Deadline Date	Application Deadline Type (EA, ED, Regular, Rolling, Priority) *see below	What application are you using? (Common App, Coalition, Black Common App, QuestBridge, School's own Application)	Do you need an official transcript sent? (Y or N)	Do you need a school counselor rec letter? (Y or N)	For OFFICE USE Only
							Submission or Mailed Date

Date of Request: _____ Paid? _____

Release of Student Records

The law requires that schools receive written permission signed by the parent/guardian before transcripts, including mid-year reports and other student records can be released to a third party. *I give approval to have transcripts and other student records sent by U.S. Mail or transmitted electronically to those listed above when a request to do so is made by my student.*

Transcript fees: Current Students: **first 3 transcripts: no cost**; additional transcripts (4+): **\$2 each**, payable at the time of request. Graduates: \$5 per transcript.

Allow 20 School Days to Process Transcript Requests

Signature of Parent/Guardian: _____ Date: _____

Student Signature: _____ Date: _____

* **Deadline Type Description – Match Deadline Type to Deadline Date**

EA=Early Action (typically non-binding)
ED=Early Decision (typically binding)