

Transcript Release Form | Fall Transfer



APPLICANT'S FIRST NAME	MIDDLE	LAST
DATE OF BIRTH	CURRENT GRADE	
CURRENT SCHOOL	SCHOOL PHONE	

Parent or Guardian

I give permission for copies of all transcripts and test records to be sent to Our Lady of Good Counsel High School.

PARENT OR GUARDIAN SIGNATURE	DATE
------------------------------	------

Please submit this form to your child's registrar or counselor for processing.

Registrar or Grade Counselor

Please email or mail a final grade transcript from years prior and the 1st semester of current grade report card. Please include any standardized test results for the past two years.

Our Lady of Good Counsel High School
Attn: International Student Programs
17301 Old Vic Blvd.
Olney, MD 20832

Phone: 240-283-3341
Email: gmcbear-linton@olgchs.org

Please do not fax transcripts.