



High School Student Inclusive Transcript Request



This form will authorize the Central High School Counseling Center and/or Principal's Office to provide all necessary transcripts for college and scholarship applications as requested by parents and students through the Counseling Center. Please return this form to the Counseling Center. Transcripts will not be sent without this authorization. This signed release is considered in effect during the time the student below is enrolled Central High School, so a new form is not required each year.

Print Student's Name

Age

Date of Birth

Anticipated Year of Graduation (ie Class of 2023)

Parent's Signature (if student is not 18)

Date

Student's Signature

Date

STUDENT ATHLETES PLEASE READ BELOW AND SIGN:

As a student athlete (or the parent of a student athlete) I grant Central High School Coaching Staff the authority to release my transcript to post-secondary institutions.

Parent's Signature (if student is not 18)

Date

Student's Signature

Date