REQUEST FOR OFFICIAL TRANSCRIPT

Student Name: _____ **Student ID #:** _____

Transcript Recipient: _____
(Name of college, scholarship, organization, military personnel, company, etc.
If applying to multiple colleges using the same online platform (i.e. Common App), only one form needs to be submitted.)

Transcript must be received by (deadline date): _____
REMEMBER TO ALLOW AT LEAST 10 SCHOOL DAYS FOR YOUR TRANSCRIPT REQUEST TO BE PROCESSED!

_____   _____

Student Signature   Parent Signature

(Handwritten original signatures are required)

Do you need anything additional included with your transcript?

A transcript includes your transcript from grades 9 – 12, most current report card, and school profile.

*Should a copy of your counselor recommendation letter be included? ○ **YES**   ○ **NO**

   *If yes, have you provided your counselor with a copy of your completed Request for Recommendation form? ○ **YES**   ○ **NO**

*Is a counselor form required to be completed by your counselor ○ **YES**   ○ **NO**
   *If yes, please email or provide your counselor with the form. **BE SURE TO COMPLETE ANY PORTION THAT IS REQUIRED TO BE FILLED OUT BY YOU.**

How does your transcript need to be sent? (Select one option)

○ **MAILED** (You are responsible for mailing your transcript to the recipient. We will provide a transcript in a sealed envelope and give it back to you so that you can mail it).
YOUR TRANSCRIPT WILL BE READY FOR PICK UP NO LATER THAN 10 SCHOOL DAYS FROM THE DAY YOUR TRANSCRIPT REQUEST FORM WAS RECEIVED BY YOUR COUNSELOR. BE MINDFUL OF POSTMARK/DEADLINE DATES.

○ **SUBMITTED ONLINE**
   Select the online program you are using:
      ☐ Common App
      ☐ Standout College Admissions
      ☐ Send EDU/Parchment
      ☐ Common Black College Application
      ☐ NCAA Eligibility Center

○ **EMAILED**
We can send you a copy to your personal email address but know that it will be considered an unofficial copy. Typically, colleges, scholarship representatives, military representatives, etc. will want an official copy emailed directly from your counselor.
      Name of transcript recipient: _____
      Email address of transcript recipient: _____

○ **I WILL PICK UP A COPY** (For use with scholarship applications, to be hand carried to a representative, etc.)

_____

THIS SECTION IS FOR COUNSELOR USE ONLY

Date Request Received: _____   Date submitted or ready for pickup: _____
Items included: ☐ Transcript   ☐ School Profile   ☐ Other: _____   **IF PICKED UP, date**
                    ☐ Report Card ☐ Letter of Recommendation   **and student initials:**