

Calvert County Public Schools

High School Transcript / Consent for Record Release

Student Name: _____ Student Id #: _____ Date: _____

Student Cell: _____

Email Address: _____

Please note: You must request Official SAT/ACT scores to be sent directly from the College Board or ACT.

*****This form must complete, signed by a guardian, and submitted to your assigned school counselor at least 10 school days prior to application deadline*****

I am requesting my transcript be released to support my application to:

Military ☐

Trade/Union: ☐

Scholarship ☐

College/University: ☐

For Common App, Black Common App, and other application/portal, please be sure to enter the correct counselor's name and email address to ensure access.

Organization Name	College Deadline	Common App	Black Common App	Other (Complete Back side of form)	Letter of Rec Required?
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This is a 2-sided form, please complete the entire form

Other (i.e. not Common Application or other platforms):

Please make sure that the information provided below is complete and accurate.

1. **Organization Name:** _____
Contact Person (if applicable): _____
Method: Email ☐, Mail ☐ Fax ☐ Other ☐ _____
Delivery instructions (i.e. email address, mailing address): _____

Additional items to be sent with transcript: Please check all that apply:

- ☐ Secondary School Report (student must provide)
☐ Counselor Letter of Recommendation
☐ Graduation Verification Letter (Military, Union, Job)
☐ Other: _____

2. **Organization Name:** _____
Contact Person (if applicable): _____
Method: Email ☐, Mail ☐ Fax ☐ Other ☐ _____
Delivery instructions (i.e. email address, mailing address): _____

Additional items to be sent with transcript: Please check all that apply:

- ☐ Secondary School Report (student must provide)
☐ Counselor Letter of Recommendation
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☐ Other: _____

3. **Organization Name:** _____
Contact Person (if applicable): _____
Method: Email ☐, Mail ☐ Fax ☐ Other ☐ _____
Delivery instructions (i.e. email address, mailing address): _____

Additional items to be sent with transcript: Please check all that apply:

- ☐ Secondary School Report (student must provide)
☐ Counselor Letter of Recommendation
☐ Graduation Verification Letter (Military, Union, Job)
☐ Other: _____

Release of Student Records

The law requires that schools receive written permission signed by the parent/guardian before transcripts and other student records can be released to a third party. Please submit original signatures and not a faxed copy.

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 son/daughter.

Signature of Parent/Legal guardian: _____ Date: ____/____/____
Student signature: _____ Date: ____/____/____

If this form is not submitted in the above-mentioned time frame the processing of your transcripts/recommendation letter will be delayed and the college(s) may not receive them by the application deadline.