

COLLEGE TRANSCRIPT REQUEST FORM (FOR CURRENT STUDENTS)

NAME _____ DATE _____

COLLEGE _____ Application Deadline _____

CIRCLE:

ENCLOSED OR ON-LINE APPLICATION
(Circle "Enclosed" ONLY if you are attaching the original application to this form)

YES OR NO FEE ENCLOSED
(Yes, only if you are attaching a check to this form)

YES OR NO COUNSELOR/GUIDANCE FORM
(Yes, only if you are attaching a paper to this form that needs to be completed by counselor)

YES OR NO RECOMMENDATION LETTERS
(Yes, only if you are attaching the actual letters to this form)

If recommendation letters are attached to this form, who are they from:

ALL SAT*/ACT SCORES LISTED ON TRANSCRIPT _____ YES OR _____ NO
(If "**NO**" list below **ONLY** the test dates you want to appear on your transcript. Circle which test (SAT or ACT), then list date of that test. If you do **NOT** want any SAT or ACT test scores listed on your transcript, check "**NONE**."

SAT or ACT _____ SAT or ACT _____ SAT or ACT _____ NONE _____

VERY IMPORTANT! *If you want your SAT scores listed on your transcript, **YOU MUST** provide the guidance office with a print-out of your SAT scores or they will not be printed on your transcript.

NOTE: It takes the guidance office approximately 6 weeks to receive scores **AFTER** you take the test. Make sure the guidance office has your scores **BEFORE** you have your transcripts mailed.

I give the Sayre High School Guidance Office permission to release my transcript, including all test scores listed above, to the college listed above.

Student Signature

Parent Signature (if under 18)