

WOODBURY PUBLIC SCHOOLS COUNSELING OFFICE COLLEGE/UNIVERSITY TRANSCRIPT RELEASE FORM

A TRANSCRIPT RELEASE FORM IS NECESSARY FOR EACH COLLEGE/UNIVERSITY REQUEST

.....
Student Name (Please Print)

.....
Year of Graduation

.....
Date

Please Note: This request should be submitted immediately following submission of application.

Most colleges require that SAT I and II and AP scores be sent directly by the College that you apply.

**Please note it is the student's responsibility to have letters of
recommendation sent to the Counseling Office**

- Documents Included
Please Circle**
- Fee Waiver
 - Midyear Report
 - Recommendations
 - Secondary School Report

Please be sure to include one book of stamps for mailing the items listed above.

| College/University/Scholarship Name and Address | Applied on-line Y / N | Teacher Recommendation (Teacher Name) | Date Application Submitted | Application Deadline Date |
|---|--------------------------|--|----------------------------|---------------------------|
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Student read and sign below:

I certify that am the person whose name appears on this form. By signing this release, I give permission for my transcript to be released to a college/university representative.

Student Signature.....Date.....

Parent Signature (if student is under 18).....Date.....