

TRANSCRIPT RELEASE FORM

This gives your permission to release the transcript to all colleges or universities that you have documented in your COLLEGES I AM APPLYING TO list in Naviance. A <u>physical copy</u> of this form must be returned to the Counseling Office <u>at least 15 school days in advance</u> of the earliest application deadline. Please note that due to the Common Application/Naviance integration, all Common Application schools listed in your accounts will receive your transcript regardless if you requested them specifically below.

| REFORE TURNING | IN VOLLE | TRANSCRIPT REQUI | ESTS. MAKE SURE TO: |
|-----------------|----------|-------------------|---------------------|
| DELOKE LOKIMING | | I RANSCRIF I REGU | LOID, MARL JURL IV. |

DATE RECEIVED
(OFFICE USE ONLY)

- o List each college in the COLLEGES I AM APPLYING TO tab in Naviance.
- o List any Common Application colleges in your Common Application account.
- o Match your Common Application account with Naviance. In accordance with the Federal Privacy Rights of parents and students, the following signed consent is necessary in order for Lower Merion School District to release student records.
 - The undersigned hereby consents to the release of all education records about the student (identifying data, birth date, academic work completed, level of achievement, grades, letters of recommendation, and such other information as may be requested.) YES______NO_____
 - The undersigned hereby consents to the release of disciplinary records as requested by the postsecondary educational institution application process including all suspensions, removals, and expulsions.
 YES_____ NO*_____

* If NO is marked on this form, the high school will indicate this lack of consent on the student's application and the student and parent will be responsible for the decision of the post-secondary educational institution to process the application without this information.

Note: I understand that I am responsible for sending my SAT and/or ACT scores directly from the testing company to the college/university.

| Student Name (Please Print) | Counselor Name | |
|---|----------------|--------------------------------|
| Student Signature | Date | EARLIEST APPLICATION DEADLINE: |
| Guardian Signature (Only required ONCE per school year) | Date | |

^{**}Please list all schools & application deadline on the next page before submitting.**

| COLLEGE | APPLICATION DEADLINE | APPLICATION TYPE |
|---------|----------------------|-----------------------------------|
| 1 | | EA / ED / Rolling / Regular / REA |
| 2 | | EA / ED / Rolling / Regular / REA |
| 3 | | EA / ED / Rolling / Regular / REA |
| 4 | | EA / ED / Rolling / Regular / REA |
| 5 | | EA / ED / Rolling / Regular / REA |
| 6 | | EA / ED / Rolling / Regular / REA |
| 7 | | EA / ED / Rolling / Regular / REA |
| 8 | | EA / ED / Rolling / Regular / REA |
| 9 | | EA / ED / Rolling / Regular / REA |
| 10 | | EA / ED / Rolling / Regular / REA |
| 11 | | EA / ED / Rolling / Regular / REA |
| 12 | | EA / ED / Rolling / Regular / REA |
| 13 | | EA / ED / Rolling / Regular / REA |
| 14 | | EA / ED / Rolling / Regular / REA |
| 15 | | EA / ED / Rolling / Regular / REA |
| 16 | | EA / ED / Rolling / Regular / REA |
| 17 | | EA / ED / Rolling / Regular / REA |
| 18 | | EA / ED / Rolling / Regular / REA |
| 19 | | EA / ED / Rolling / Regular / REA |
| 20 | | EA / ED / Rolling / Regular / REA |

^{**}If any of your materials must be sent by postal mail, you must provide stamped, addressed, 9"x12" envelopes as needed.