STAPLES HIGH SCHOOL 70 North Avenue, Westport, Connecticut 06880

THE HIGH CONTENTS

Guidance Department

Phone: (203) 341-1225

Fax: (203) 341-1235

Transcript Release Form

Students Who Currently Attend Staples – College Admissions

Name of Student: First	MI Last
Date of Birth:	
School Counselor:	
<u>=</u>	uding transcript, secondary school report, counselor recommendation, complete the following steps at least four weeks prior to your first
1. Common Application Account Match	ing and FERPA Waiver
2. Counselor Recommendation Question	nnaires (Student and Parent/Guardian)
3. Student Resume	
4. Transcript Release Form	
5. Transcript/Recommendation Request	- College List Form
6. Student schedules an appointment wi	th their school counselor to request transcript and recommendations
Note: For NCAA, complete the NCAA Eligi	bility Center Transcript Release Form and return to Mrs. Fugitt.
School to release my transcript to the recipautomatically to all colleges for which I har required by the college; final grades will be	thts and Privacy Act (Public Law #93-380), I authorize Staples High Hent(s)/college(s) I have indicated. Mid-year grades will be sent we already completed a transcript request, whether or not they are sent automatically to the college I have indicated I will attend. I release all liability and hold them harmless for providing such information ation.
Student Signature:	Date:
Parent/Guardian Signature:	Date: