

# College/Scholarship/Transcript Request

Student Name: \_\_\_\_\_

Date Submitted to Guidance Office \_\_\_\_\_

College/Organization	Date Needed	College/Organization	Date Needed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For materials requiring a counselor recommendation or student profile, allow **20 school days** and schedule an appointment with your counselor if needed.

For a transcript only, allow **5 school days**.

Number of transcripts needed: \_\_\_\_\_

Transcripts are \$4.00 each and must be paid at the time of request.

Amount Paid: \$\_\_\_\_\_ Initials of person collecting: \_\_\_\_\_

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Your letter(s) of recommendation, secondary school report, transcript, last report card and school profile are mailed directly to the college by the counselor/registrar in the stamped, addressed envelope(s) provided by the student. Date mailed:

\_\_\_\_\_

I have been notified that my college application materials have been sent.

Student signature \_\_\_\_\_