

SOUTH LAKES HIGH SCHOOL TRANSCRIPT REQUEST FORM REVISED 6/2016

SLHS CEEB CODE 471826

Name: _____ Date of Birth: _____ SLHS ID# _____ Email: _____

(Print neatly) Last, First, Middle

Counselor: _____

SLHS does not mail SAT or ACT scores to colleges. Request them at www.collegeboard.com (SAT) or www.actstudent.org (ACT)

- Provide business sized envelopes addressed to each college office of admissions with two (2) first-class stamps for each record request which needs to be mailed.
- The first five (5) transcripts are free. Additional transcripts cost \$5 each.
- All records, secondary school reports, and letters of recommendation must be requested at least **15** school days before the (school or scholarship) deadline.
- 7th semester grades will be sent automatically in February for all schools requested.
- Final grades will be sent to the college selected on the end-of-year senior survey.

For Office Use Only

Date of Transcript Request	College or Scholarship Deadline	Print neatly: Name of College or scholarship Street address City, State Zip	(Found on F.C.) Method of Submission: Common App; Mail; Edoc	Counselor Letter Needed?	Pick one: Early Action(EA); Early Decision (ED); Regular; or Rolling	Fee paid	Dates Processed
			<input type="checkbox"/> Common App <input type="checkbox"/> Mail <input type="checkbox"/> E doc	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EA <input type="checkbox"/> ED <input type="checkbox"/> Regular <input type="checkbox"/> Rolling		Ready: _____ Mailed: _____ Submitted: _____ Returned: _____
			<input type="checkbox"/> Common App <input type="checkbox"/> Mail <input type="checkbox"/> E doc	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EA <input type="checkbox"/> ED <input type="checkbox"/> Regular <input type="checkbox"/> Rolling		Ready: _____ Mailed: _____ Submitted: _____ Returned: _____
			<input type="checkbox"/> Common App <input type="checkbox"/> Mail <input type="checkbox"/> E doc	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> EA <input type="checkbox"/> ED <input type="checkbox"/> Regular <input type="checkbox"/> Rolling		Ready: _____ Mailed: _____ Submitted: _____ Returned: _____

I hereby request that South Lakes High School release the necessary official records of my student to the colleges or scholarships listed. I understand that no records will be sent until all transcript fees are paid by cash or checks made out to "South Lakes High School." Additionally, I waive my right to access the school counselor letter of recommendation and/or secondary school reports.

Parent Signature _____

Date _____

Student Signature _____

My child is on Free/Reduced Lunch. Yes No

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