Transcript Request Form for College Applications

Student Name: _____ Student ID:_____ Counselor: _____ Date: _____

Please allow *10 school days* prior to your deadline for your request to be submitted to your college.

Review the College Application Checklist for detailed instructions to support your college applications.

$2.00 per transcript request

College Name	**Application Deadline Date**	**Application Type**: Early Decision, Early Action, Priority, Regular or Rolling	**Common Application** Are you using the common app? Y/N	**Counselor Recommendation** Y/N Senior Survey Completion is required.

I have read this form and understand the directions to support my college applications. **Student Signature**: _____

Total Transcript Requests:_____

Total Request x $2.00 = _____