

SOUTH LAKES HS COLLEGE APPLICATION RECORD & TRANSCRIPT REQUEST FORM

***** Page 1 of 2. Read the directions prior to submitting this form. *****

Name: _____ FCPS ID: _____ Email: _____ Cell Phone #: _____
 (Print neatly) Last, First, Middle Initial

Counselor: _____

1. **Complete the Senior & Parent Questionnaires and Consent to Release Student Records** (one time) — Submit the questionnaires to your counselor. These must be completed prior to requesting a counselor recommendation. Submit the consent form to Ms. Gifford in Student Services (Rm. 311 in the Main Office.) This must be submitted each school year to allow records to be released.

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

2. **Test Scores:** Your transcript does not display SAT or ACT scores. If required, contact SAT or ACT to have your test scores sent directly to the college and NCAA as needed. **SLHS CEEB Code 471826**

3. Complete the information requested on the back of this form. **A parent/guardian signature (if student is NOT 18 years old) and student signature are required on every form.**

4. **For prospective student-athletes**, listing “College Coach” gives SLHS Student Services permission to send/give an unofficial transcript/test scores to any college coach requesting your records. (This ONLY applies to official requests made by a college coach/recruiter to SLHS.) If you have registered with NCAA, please only list NCAA. If you have attended any other HS outside of FCPS, you must also request that HS also send your transcript to NCAA.

5. **Submit payment:** The first five transcripts are furnished free of charge (ten for students on free/reduced lunch). Additional copies are \$5.00 per transcript. This INCLUDES self-reporting schools since mid-year transcripts and other records (secondary school report) are still sent to those schools. EXCEPTION: There is no charge for scholarship requests. **No records will be forwarded until the fees have been paid.**

College Deadline	SLHS Request Deadline	College Deadline	SLHS Request Deadline
October 15	September 17	January 1	December 2
November 1	October 10	January 15	December 11
December 1	November 6	February 1	January 8
December 15	November 20	March 1 or later	February 6

6. **Turn in this form and necessary payment** to the Transcript Assistant, Ms. Gifford, in SLHS Student Services (Rm. 311 in the Main Office.) You must do this IN PERSON during the Transcript Office hours: Monday, Tuesday & Thursday – 7:30am-12:30pm; Wednesday 10:30am-3:30pm. This form should be used in lieu of any college transcript release form. Any fees should be stapled to the transcript form or put in a sealed envelope and attached to this form. You can always turn in additional forms with additional colleges. **Requests must be received by SLHS at least 15 SCHOOL DAYS before the (school or scholarship) deadline.**

7. **What’s next?** An application package is submitted from SLHS to the college/organization and Naviance is updated with the submitted date/materials sent. An application package includes: transcript if applicable (lists final grades through the end of junior year, weighted GPA and senior courses,) a Secondary School Report Form and SLHS/FCPS profiles. When requested and required, a counselor recommendation letter is also included. Mid-year grades are automatically mailed in mid-to-late February to all colleges you have included on this form. Final transcripts are automatically submitted to any school/organization indicated by you on your Senior Survey which will be completed in early May. There is no additional charge for submitting mid-year grades or final transcripts.

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Name: _____ FCPS ID: _____ Date Form Submitted: _____

Print Neatly: Name of College or Scholarship Address/Campus Location	What application will you use to apply?	College deadline date	Transcript needed?	Counselor letter needed?	Decision Type	For Student Services Use Only		
						Fee paid	Dates Processed	Delivery Method
	<input type="checkbox"/> Common App <input type="checkbox"/> Coalition <input type="checkbox"/> School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<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: _____ Submitted: _____ Returned: _____	<input type="checkbox"/> CA <input type="checkbox"/> eDoc <input type="checkbox"/> Mail <input type="checkbox"/> Other
	<input type="checkbox"/> Common App <input type="checkbox"/> Coalition <input type="checkbox"/> School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<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: _____ Submitted: _____ Returned: _____	<input type="checkbox"/> CA <input type="checkbox"/> eDoc <input type="checkbox"/> Mail <input type="checkbox"/> Other
	<input type="checkbox"/> Common App <input type="checkbox"/> Coalition <input type="checkbox"/> School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<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: _____ Submitted: _____ Returned: _____	<input type="checkbox"/> CA <input type="checkbox"/> eDoc <input type="checkbox"/> Mail <input type="checkbox"/> Other
	<input type="checkbox"/> Common App <input type="checkbox"/> Coalition <input type="checkbox"/> School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<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: _____ Submitted: _____ Returned: _____	<input type="checkbox"/> CA <input type="checkbox"/> eDoc <input type="checkbox"/> Mail <input type="checkbox"/> Other
	<input type="checkbox"/> Common App <input type="checkbox"/> Coalition <input type="checkbox"/> School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<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: _____ Submitted: _____ Returned: _____	<input type="checkbox"/> CA <input type="checkbox"/> eDoc <input type="checkbox"/> Mail <input type="checkbox"/> Other
	<input type="checkbox"/> Common App <input type="checkbox"/> Coalition <input type="checkbox"/> School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<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: _____ Submitted: _____ Returned: _____	<input type="checkbox"/> CA <input type="checkbox"/> eDoc <input type="checkbox"/> Mail <input type="checkbox"/> Other
	<input type="checkbox"/> Common App <input type="checkbox"/> Coalition <input type="checkbox"/> School		<input type="checkbox"/> Yes <input type="checkbox"/> No	<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: _____ Submitted: _____ Returned: _____	<input type="checkbox"/> CA <input type="checkbox"/> eDoc <input type="checkbox"/> Mail <input type="checkbox"/> Other

I hereby request that South Lakes High School release the necessary official records of my student to the colleges/organizations listed. I understand that no records will be sent until the FCPS consent form is on file (see item 1) and all transcript fees are paid (see item 5.)

My student is on Free/Reduced Lunch AND has completed the FCPS Consent to Share Information for Benefits for Other Programs: YES NO

Parent/Guardian Signature (if student is NOT 18)

Date

Student Signature