Calvert County Public Schools **High School Transcript / Consent for Record Release**

______Student Id #: ______Date:_____

Student Name:____

Emai	ent Cell: I Address:				
Pleas	e note: You must request Official SAT/ACT	Γ scores to be sent directly fr	om the C	ollege Bo	ard or ACT
	nis form must complete, signed by a guard 10 school days prior to application deadli		assigned s	school cou	unselor <u>at</u>
	Name of College	Application Deadline	Common App	Black Common App	Coalition

^{*}This is a 2-sided form, please complete the entire form*

College(s) that you are applying to utilizing school portal (ie not using the Common Application or other platform):

***Please make sure that the information provided below is complete and accurate.

1.	Name of College/University:				
	Application Deadline:				
	Method (email, mail, fax, etc?)				
	Provide the email, fax, or mailing address where the transcript should be sent:				
	Additional items to be sent with transcript: Please check all ☐ Secondary School Report (student must provide) ☐ Counselor Letter of Recommendation ☐ Other:	I that apply:			
2.	Name of College/University:				
	Application Deadline:				
	Method (email, mail, fax, etc?)				
	Provide the email, fax, or mailing address where the transcript s				
	Additional items to be sent with transcript: Please check all ☐ Secondary School Report (student must provide)	I that apply:			
	□ Counselor Letter of Recommendation□ Other:				
3.	Name of College/University: Application Deadline: Method (email, mail, fax, etc?)				
	Provide the email, fax, or mailing address where the transcript s	should be sent:			
	Additional items to be sent with transcript: Please check all ☐ Secondary School Report (student must provide) ☐ Counselor Letter of Recommendation	I that apply:			
The law	of Student Records requires that schools receive written permission signed by the parent/guardian before transcripts a y. Please submit original signatures and not a faxed copy.	and other student records can be released to			
	proval to have transcripts and other student records sent by U.S. Mail or transmitted electronically by my son/daughter.	to those listed above when a request to do so			
Signa	ture of Parent/Legal guardian:	_ Date://			
Stude	nt signature:	Date://			

If this form is not submitted in the above-mentioned time frame the processing of your transcripts/recommendation letter will be delayed and the college(s) may not receive them by the application deadline.