

**WEST SHORE SCHOOL DISTRICT****TRANSCRIPT/RECORD RELEASE**

NAME \_\_\_\_\_

☐ Red Land    ☐ Cedar Cliff

I request the School Counseling Department send a copy of my high school transcript to the school(s) or agency(ies) listed below. I understand information on the transcript includes all final grades earned for subjects taken in grades 9 through 12, cumulative grade point average, class rank, and grade 11 PSSA scores. All college admissions scores (SAT Reasoning, SAT Subject Tests, ACT, AP Exams) need to be processed through the students College Board or ACT on-line account. Students should allow 2 weeks for this transcript request to be processed.

**COLLEGE/AGENCY NAME****SUBMITTED****DATE**

Online    Paper

_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

Intended Major \_\_\_\_\_

I have included:

- |  |  |
|--|--|
| <input type="checkbox"/> Envelopes (Stamped and Addressed) | <input type="checkbox"/> Letters of Recommendation |
| <input type="checkbox"/> Essays                            | <input type="checkbox"/> Application Fees          |

\_\_\_\_\_  
Parent Signature

(required if student is under 18 yrs. old)

\_\_\_\_\_  
Student Signature