



General McLane High School
 Official Transcript Request Form
Please allow a minimum of 10 school days for processing.

Name _____ Date _____ Graduation Year _____

Please fill out this form and have all enclosures attached before submitting to Guidance.
 Incomplete forms will be returned to the student.

Name and **address** of the college and/or individual/department where transcript is being sent:

~ Please list your intended major _____

~ Is there a College issued application deadline date? YES___ NO___ If yes, give date_____

Please select all that apply:

- ___ Applied to the College using the Common Application
- ___ Applied online or in person
- ___ Completed Application is attached
- ___ Fee Waiver or Application fee (check/money order payable to the college/university) is attached

All requests (except Penn State and Common Application)

- ___ Envelope **addressed** to the college/university
- ___ Postage

Additional items to be sent:

___ Letters of Recommendation (list below whose letters are attached)

___ Secondary School Report (form must be attached)

___ Other _____

This form should only be turned in once your application has been submitted online or is attached and all enclosures are included.

Parent signature required if student is under age 18 for the release of transcript.

 Parent or Student Signature

 Date

COUNSELING OFFICE USE ONLY:			Initial _____	Date Rec'd _____
Incomplete _____	Returned to Student _____	Rec'd Corrected _____		
Date mailed _____	Emailed _____	Faxed: _____	Given to Student _____	