



General McLane High School  
Official Transcript Request Form

Please allow a minimum of 10 school days for processing.

Student's Name: \_\_\_\_\_ Date \_\_\_\_\_ Graduation Year \_\_\_\_\_

Please list your intended major \_\_\_\_\_

Test scores submitted as part of the application process must be requested by the student from [Collegeboard.org](http://Collegeboard.org) and/or [ACT.org](http://ACT.org).

Please fill out this form to release information related to your academic record. Incomplete forms will be returned to the student.

Please place a check mark in front of all applicable statements granting permission.

\_\_\_\_ **Common App:** I grant permission for the GM Guidance Department to process all transcript requests submitted via Common App as requested through Naviance. I understand that I will submit my application and requests for letters of recommendation through my Common App Account. I will only submit transcript requests through Naviance.

\_\_\_\_ **Naviance:** I grant permission for the GM Guidance Department to process all transcript requests submitted via Naviance.

\_\_\_\_ **NCAA:** I grant permission for the GM Guidance Department to release my transcripts to the NCAA.

\_\_\_\_ **Scholarship Requests**

\_\_\_\_ **Personal Use**

Parent/Guardian Signature: \_\_\_\_\_  
(Parent Signature required if student is under the age of 18)

Student Signature: \_\_\_\_\_ Date of Request \_\_\_\_\_

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