**Official College Transcript Request Form**

Use a separate form for each transcript request.

When requesting a transcript for a “Scholarship” application and/or requesting a transcript to be sent to a “College/University”, please fill out the information below and return to the guidance office.

Allow for 1 WEEK to process. \*The student is responsible for meeting deadlines and downloading all necessary paperwork.\*

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Student Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby give permission to Hilltop Jr/Sr High School to release my official transcript to the college, school, or agency named below.

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

Today’s Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of College/University\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office of Admissions Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please Check One:

\_\_\_I have applied to this college online. Date applied/will apply online.

\_\_\_I have included all necessary paper application items; such as application, application fee, essay, resume or any other items you would like mailed with your transcript.

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Please check all that apply:

\_\_\_I have downloaded and attached all necessary forms such as School/Counselor Report, College Prep Form, and/or Secondary reports and included them with this form (not all colleges require these).

\_\_\_I am including the completed teacher recommendation forms the school requires.

\_\_\_The teachers will give their recommendations directly to the counselor to send in.

\_\_\_The teachers will mail their recommendations directly to the office of admissions to the college address I provided for them (if applicable).

\_\_\_My counselor is writing a recommendation.

If you have any questions, be sure to ask! This is your future; be in control of it!!!

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| --- |
| For Counselor Use Only |
| Date received\_\_\_\_\_\_\_\_\_\_\_\_\_ Date mailed and recorded\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |