



Transcript Request Form

Please send a copy of my Collegiate transcript to: _____

<i>Date Requested</i>		<i>Counselor</i>	<input type="radio"/> Mr. Prince <input type="radio"/> Mr. Labove						
<i>Student</i>									
<i>College/ University Address:</i>									
<i>Teacher Recommendations</i>	Teacher 1: Teacher 2:								
<i>Deadlines</i>	Please record Deadline Date following the Application Submission Plan you are using for this application. <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><input type="radio"/> Early Decision _____</td> <td style="text-align: center;"><input type="radio"/> ED II _____</td> <td style="text-align: center;"><input type="radio"/> Early Action _____</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/> Regular Decision _____</td> <td style="text-align: center;"><input type="radio"/> Rolling _____</td> <td style="text-align: center;"><input type="radio"/> Priority/Honors/Scholarship _____</td> </tr> </table>			<input type="radio"/> Early Decision _____	<input type="radio"/> ED II _____	<input type="radio"/> Early Action _____	<input type="radio"/> Regular Decision _____	<input type="radio"/> Rolling _____	<input type="radio"/> Priority/Honors/Scholarship _____
<input type="radio"/> Early Decision _____	<input type="radio"/> ED II _____	<input type="radio"/> Early Action _____							
<input type="radio"/> Regular Decision _____	<input type="radio"/> Rolling _____	<input type="radio"/> Priority/Honors/Scholarship _____							
<i>Standardized Testing</i>	I am responsible for sending my ACT/SAT testing directly from the College Board or ACT. Collegiate cannot send scores on your behalf.								
<i>Please check your level of interest in this college.</i>	<input type="radio"/> High <input type="radio"/> Medium <input type="radio"/> Low	<i>Common Application Member School?</i>	<input type="radio"/> Yes <input type="radio"/> No						
<i>Signatures</i>	We request that the College Counseling Office mail to the institution named above, a copy of the student's official transcript containing a list of courses and grades earned. We understand that Louisville Collegiate School will provide the institution or agency with whatever additional information is requested regarding the student's application. We also request that the college counselor and/or teacher submit descriptive statements in support of the application to the above named institution. We understand that these statements are confidential and we hereby waive any rights we may have to review their content.								
	Parent Signature	Student Signature							
	_____	_____							

Stand out. Be Collegiate.