## **Transcript Release Form**

Consent for Dissemination of Student Records to a Third Party

## This form must be submitted to the Guidance Office Secretary AT LEAST FIVE (5) WORKING DAYS PRIOR TO ANY DEADLINE DATES

<u>OFFICIAL RECORDS</u> will carry the school seal, be officially stamped, and MUST be mailed by Mansfield High School (some exceptions may apply).

**UNOFFICIAL RECORDS** will be stamped "Unofficial" and may be hand-carried.

This release form is acceptable means for release to the NCAA Clearinghouse

(Go to www.ncaaclearinghouse.net to register before filling out this form)

Student Name: _		Grad. Year:		
(Maiden	name, if applicable	le)		
Date of Birth:		Drop Off Date:		
Signature: I authorize th	ne release of my	Mansfield High School transcrip	pt** and records as	follows:
	PLE	ASE CHECK ALL THAT API	PLY:	
Official Transcri	pt (Includes name	e, address, date of birth, all courses, gra	des, credits, class rank,	and GPA)
Unofficial Trans	cript			
Teacher Recomm	mendations (if o	on file)		
Other:				
ГО:				
College/Un	iversity	Address (City, State)/ Campus	Application Deadline Date	Online or Paper Application
**NOTE: A \$3.00 proc Guidance Office.	essing fee will l	be charged for <u>EACH</u> transcript	t and related materi	als sent by the
For Office Use Only:				
Released by:	Date:	Maile	ed by:	_ Date: