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

OFFICIAL RECORDS 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 or mailed.

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:(Maiden name, if applicable)		Grad. Year:		
	Drop Off Date:			
Signature:				
I authorize the release of my N	Mansfield High School transcrip	t** and records as	follows:	
PLEAS	SE CHECK ALL THAT APP	LY:		
Official Transcript (Includes name,	address, date of birth, all courses, grad	les, credits, class rank,	and GPA)	
Unofficial Transcript				
Teacher Recommendations (if on	file)			
го:				
College/University	Address (City, State)/ Campus	Application Deadline Date	Online or Pape Application	
f Transcript is to be mailed home or t	o an employer, please complet	e below informati	on:	
Student Name/ Employer Name	Address (City, State, Zip)			
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Guiaance Office.

For Office Use Only:			
Released by:I	Date:	Mailed by:	_ Date: