

Bishop Guilfoyle Catholic High School
Transcript Request and College Application Checklist

Please allow one week for your transcript to be processed

1. You must complete this form for each transcript you wish to have sent (college application, scholarship application, sports-related, etc.) Transcripts and associated counseling forms will not be sent without this completed form including parent/guardian and student signature.
 2. Please attach all information you wish to have mailed with your transcript (essays, letter of recommendation). Please wait to submit this request form until you have attached all information.
 3. Seniors will be billed a one-time \$25.00 transcript fee. This fee will be billed to your account via the business office.
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TRANSCRIPT REQUEST:

Student Name: _____

Please send my transcript to (college name): _____

Address: _____

COLLEGE APPLICATION CHECKLIST:

- A. Please place a check mark on each line to indicate what information is included with your request. Please attach all information you wish to have mailed with your transcript.**
- B. Please put N/A if your school does not require a particular component.**

_____ My college application is attached. Please mail with my transcript.

_____ My college application was completed On-Line

_____ I applied using The Common Application. *Please know that after your transcript is initially uploaded to The CommonApp it will be accessible by each college you have on your account.

_____ I applied Early Decision and my information is due by: _____

_____ I applied Regular Decision

_____ My SAT® and/or ACT® Scores have been sent through collegeboard.org

_____ My school accepts SAT® and/or ACT® scores from my transcript

_____ My school requires letters of recommendation:

_____ Please mail the attached letter(s) of recommendation with my transcript.

Letters from (please list names): _____

_____ I provided my reference with an addressed stamped envelope to send the recommendation directly

_____ A Counselor Form is attached and needs to be completed. *Please know that PSU counselor forms are completed on-line and do not need to be attached to this form.

_____ For **international** mailings please attach \$100 FedEx fee or verify that your university will accept your transcript electronically. International Admissions Office email address: _____

TRANSCRIPT RELEASE:

By signing and dating here, I give permission to Bishop Guilfoyle Catholic High School to release my child's official and/or unofficial transcript to any authorized representative of a College or University who requests it for the purpose of possible recruitment.

Parent/Guardian Signature (required for 1st request): _____ **Date:** _____

By signing and dating here, I give permission to Bishop Guilfoyle Catholic High School to release my official and/or unofficial transcript to any authorized representative of a College or University who requests it for the purpose of possible recruitment.

Student Signature (required for every request): _____ **Date:** _____