

**BRIAR WOODS HIGH SCHOOL
\$cholarship Transcript Release Form**

Return completed form to Mrs. Comparin in the Career Center

All items must be complete before this request will be processed.

Please allow 1 week to process your transcript request. Allow 2 weeks if recommendation required.

_____ Student's Full Legal Name

_____ Today's Date

Scholarship Name	Type of Scholarship	Scholarship Amount	Deadline

Does this scholarship require a counselor Letter of Recommendation? **Yes** _____ or **No** _____ (check one)

Does the transcript need to be **official** _____ or **unofficial** _____ (check one)?
(official transcripts can only be emailed directly to the scholarship organization)

What is the delivery method? (pick one)

_____ electronic, direct from school - email address: _____

_____ electronic, via online application from student – email address: _____

_____ mailed directly from school

Address: _____

City: _____ State: _____ Zip Code: _____

Postmarked by _____ or Received by _____

_____ hand delivered from student in sealed envelope

_____ Other – please specify _____

Is this scholarship in Naviance? **Yes** _____ or **No** _____ (check one)

If not, how did you learn about this scholarship? _____

MUST COMPLETE BOTH SIDES (PAGES)



Transcript Release Form

Release of Student Records

Student Name: _____

Student ID: _____

By signing this form, I authorize LCPS to release my student records covered under the Family Educational Rights and Privacy Act (FERPA) to a third party; such as an institution of higher education, organization or scholarship committee. Student records are only available to those who have authorization from the student, parent or guardian. *By signing this form, I give permission for LCPS to send my student's academic records to the institutions requested by my student through the academic year.*

By checking this box, I waive my right to review letters of recommendation or information on the secondary school report form. Individual recommenders may choose to make the recommendation conditional on a signed waiver of access.

Parent Signature (if student is under 18)

Parent's Name – Printed

Students Signature

Date

School, Organization, or Scholarship Sponsor	Address	Deadline	Date of Request	Delivery Method (electronic/mailed)	Date Processed (office use only)
				<input type="checkbox"/> electronic <input type="checkbox"/> mailed	

Transcripts:

- Colleges that accept electronic transcripts are FREE.
- Colleges that require mailed transcripts are \$3.00 each. Pay by cash or check (payable to high school).
- Mid-year grades will be sent automatically to all requested schools after semester grades are finalized.
- Final grades will be sent to the college selected on your end-of-year Senior Survey.

Test Scores

- SAT Reasoning and Subject tests, Advanced Placement Exams, and ACT must be sent directly from the College Board or ACT at the request of the student.
 - www.collegeboard.org
 - www.act.org

Dual Enrollment Transcripts:

- Request your end of year DE transcript directly from the college awarding the DE credit (NOVA, JMU, GMU, or Shenandoah).
- LCPS DOES NOT send Dual Enrollment transcripts.