



WEST POTOMAC HIGH SCHOOL

AUTHORIZATION FOR RELEASE OF STUDENT ACADEMIC TRANSCRIPT FOR SENIORS

Student Name: _____
(Last Name, First Name, Middle Initial)

Student ID: _____

Email address: _____

Phone: _____

- **First 3 copies are free; thereafter each transcript is \$5.00. Make checks payable to West Potomac High School.** Students on FCPS free/reduced lunch DO NOT pay transcript fees, but DO pay late fees. No charge for Scholarship and NCAA transcripts.
- **Transcripts must be requested at least THREE WEEKS (not including weekends/holidays) before the college application deadline.**
- There is an additional \$5.00 late fee for each transcript requested less than three weeks before the deadline. While every effort will be made to ensure the on-time arrival of school documents, payment of a late fee does **not** guarantee mailing or electronic submission of documents by the deadline.
- For a counselor recommendation, you **MUST** submit a *Request for Counselor Recommendation* form to your counselor at least THREE weeks prior to the deadline. (Teacher recommendations will not be sent by your school counselor.)

WPHS does NOT mail standardized test scores (SAT, ACT, TOEFL) to colleges.

You must request them directly through the College Board or ACT website.

Each transcript package will include:

1. Your official transcript which lists all final grades through the end of your junior year, your cumulative GPA, and senior courses
2. WPHS Secondary School Profile
3. WPHS Secondary School Report
4. Mid-year report including semester grades sent in February for all schools requested
5. Final senior grades sent in June to the college you're attending, based on senior survey answers

DEADLINE to bring <u>Transcript Request</u> to your Counselor	Application Deadline for College/University
September 24, 2019	October 15, 2019
October 11, 2019	November 1, 2019
October 25, 2019	November 15, 2019
November 1, 2019 (early due to Thanksgiving)	December 1, 2019
November 20, 2019 (early due to Winter Break)	January 1, 2020
December 4, 2019	January 15, 2020
January 10, 2020	February 1, 2020

When your transcript request form is completed, please bring it to your school counselor for verification before submitting to Ms. Hofmann.



CONSENT FOR RELEASE OF STUDENT RECORDS IN SUPPORT OF POSTSECONDARY APPLICATIONS

Instructions for Use: This form is to be used by parents and/or guardians and students aged 18 or older to authorize Fairfax County Public Schools (FCPS) to release student records and related information to support student applications to colleges, universities, scholarship sponsors, employers, or other similar organizations. This consent form needs to be signed only once. The student, parent and/or guardian will use a separate form, your school's transcript request form, to identify all schools and organizations to which records may be sent.

CONSENT

By my signature below, I authorize FCPS to release to any school or organization identified by me on my school's transcript request form any of my school records or other information about me that is requested by the school or organization in support of my application. This may include, but is not limited to, my transcript, other school records, and any letters of recommendation written by FCPS employees. However, this authorization specifically excludes the release of discipline information.

By my signature below, I also authorize FCPS employees, including but not limited to, administrators, teachers, and counselors, to communicate with and respond to inquiries from the school or organization concerning my application and my credentials.

FCPS may release the required records and information by electronic or other means directly to the school or organization or to a service used by the school or organization to facilitate its application process. These services include, but are not limited to, the National Collegiate Athletic Association Eligibility Center, Common Application, Naviance, and/or Family Connection, Coalition for Access, Affordability, and Success, and other services approved by FCPS.

I also understand that I have the right to review or have copies of any records that FCPS transmits to the school or organization. If I have responded yes to the statement below, however, I have waived the right to review or have copies of any letters of recommendation written by FCPS employees.

If an application requires or requests a student's social security number (SSN), FCPS staff members should not enter the student's SSN on his or her behalf.

Yes, I waive my right to review or have copies of any letters of recommendation written by FCPS employees.

No, I do not waive my right to review or have copies of any letters of recommendation written by FCPS employees.

My signature below confirms that I have read and understand this consent form.

Note: Both parent and/or guardian and student are required to sign this form. Parent and/or guardian signature is not required, if the student is aged 18 or over and attending a postsecondary school.

Name of Student (Please print)

Student ID

Date

Signature of Student

Signature of Parent and/or Guardian (If student is under 18)

Student Name: _____

Student ID: _____

School Counselor: _____

**WEST POTOMAC HIGH SCHOOL
TRANSCRIPT REQUEST FORM**



Name of College, Scholarship or NCAA Street Address City, State Zip Code	Application Deadline Date	Decision Type	Application Type	Counselor letter of rec required? (Yes/No)	Student Services Use Only			
					Counselor Verification (Initials)	Date Received	Fee Paid or Waived	Date Submitted to School
		<input type="checkbox"/> Early Action <input type="checkbox"/> Early Decision <input type="checkbox"/> Regular Decision <input type="checkbox"/> Rolling Admission <input type="checkbox"/> Priority	<input type="checkbox"/> College/University App <input type="checkbox"/> Common App <input type="checkbox"/> Coalition App <input type="checkbox"/> Scholarship App	<input type="checkbox"/> Yes <input type="checkbox"/> No			N/A	
		<input type="checkbox"/> Early Action <input type="checkbox"/> Early Decision <input type="checkbox"/> Regular Decision <input type="checkbox"/> Rolling Admission <input type="checkbox"/> Priority	<input type="checkbox"/> College/University App <input type="checkbox"/> Common App <input type="checkbox"/> Coalition App <input type="checkbox"/> Scholarship App	<input type="checkbox"/> Yes <input type="checkbox"/> No			N/A	
		<input type="checkbox"/> Early Action <input type="checkbox"/> Early Decision <input type="checkbox"/> Regular Decision <input type="checkbox"/> Rolling Admission <input type="checkbox"/> Priority	<input type="checkbox"/> College/University App <input type="checkbox"/> Common App <input type="checkbox"/> Coalition App <input type="checkbox"/> Scholarship App	<input type="checkbox"/> Yes <input type="checkbox"/> No				
		<input type="checkbox"/> Early Action <input type="checkbox"/> Early Decision <input type="checkbox"/> Regular Decision <input type="checkbox"/> Rolling Admission <input type="checkbox"/> Priority	<input type="checkbox"/> College/University App <input type="checkbox"/> Common App <input type="checkbox"/> Coalition App <input type="checkbox"/> Scholarship App	<input type="checkbox"/> Yes <input type="checkbox"/> No				
		<input type="checkbox"/> Early Action <input type="checkbox"/> Early Decision <input type="checkbox"/> Regular Decision <input type="checkbox"/> Rolling Admission <input type="checkbox"/> Priority	<input type="checkbox"/> College/University App <input type="checkbox"/> Common App <input type="checkbox"/> Coalition App <input type="checkbox"/> Scholarship App	<input type="checkbox"/> Yes <input type="checkbox"/> No				