



AVON HIGH SCHOOL TRANSCRIPT REQUEST FORM

STUDENT NAME: _____ COUNSELOR: _____

Cell Phone # _____

Did you transfer TO Avon High School from another high school? Yes No

If your college requires a letter of recommendation, please list of names of individuals writing letters of recommendation (Please list in order of preference as there may be limits for some colleges)

1. _____ 2. _____ 3. _____

AGREEMENT: I understand that I must **allow 15 school days for requests to be processed**. The AHS School Counseling office will **not** be held responsible for meeting the deadline of any request that is received fewer than 15 school days before the college's deadline.

Your transcript, letters of recommendation, Secondary School Report and school profile are included in the information electronically sent to each college. Mid-Year Grade Reports are automatically sent to all active college applications and your Final Grade Report will be sent to your attending college. (First Quarter Grade Reports must be requested)

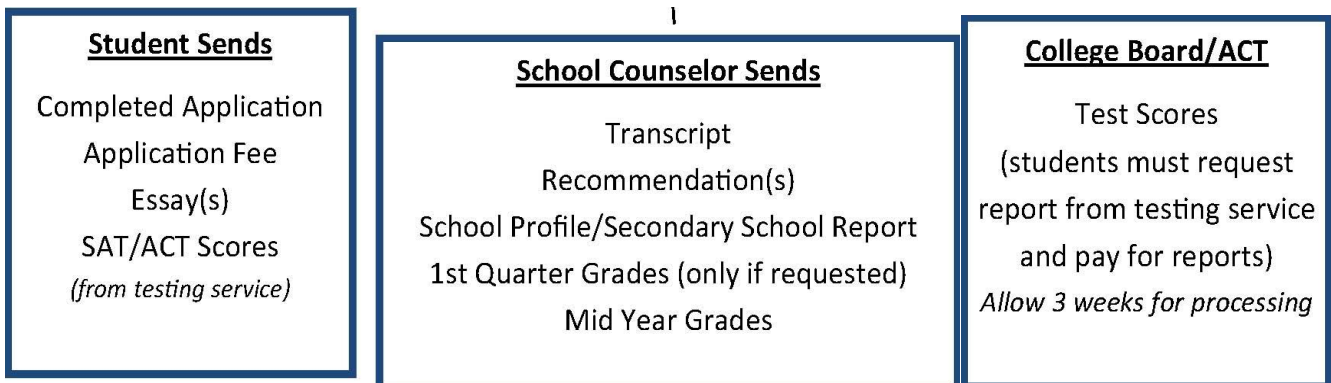
Students are required to send their own official ACT/SAT scores directly from the ACT/SAT websites.

Student Signature: _____

Parent Signature: _____
(Required to process applications)

Application Process

YOUR COLLEGE



Last Name

First Name

Fee per mailed transcript \$5.00 (only applicable for documents that need to be mailed to colleges)

									Office Use
Date	College City, State	Deadline	Using Common App?	Using Coalition App?	ED	EA	Reg	Rolling	Electronic Or Mailed
	1)								
	2)								
	3)								
	4)								
	5)								
	6)								
	7)								
	8)								
	9)								
	10)								

Please indicate whether you will be applying via CommonApp to ensure that the colleges can receive your specific documents electronically.

It is the student's responsibility to send standardized testing information to their college/universities

Date of meeting with School Counselor: _____

Counselor Signature: _____