

Transcript Release Form



Date: _____

Student Name: _____ Grade: _____

I hereby authorize Archbishop Mitty High School to release unofficial student transcripts to college Athletic Recruiting Agents. I understand that Recruiters will have access to information included on the transcript, which contains the following information: name, date of birth, and academic history.

I understand and authorize the release of an official 6th semester transcript to the NCAA Eligibility Center. I understand the Eligibility Center will have access to information included on the transcript, which contains the following information: name, date of birth, and academic history. I also understand the sending of the official transcript to the Eligibility Center will not include official test scores.

This release shall remain in effect until student graduates or otherwise indicated by parent/guardian.

Parent/Guardian Signature

Student Signature

Please return to counseling office