

Test Card documented: \_\_\_\_\_  
 Date Sent: \_\_\_\_/\_\_\_\_/\_\_\_\_



# TRANSCRIPT RELEASE FORM

PLEASE ALLOW 3 DAYS FOR PROCESSING TRANSCRIPTS

Student Name: \_\_\_\_\_ Cypress Park ID# \_\_\_\_\_

Birth Date: \_\_\_\_\_ Grade: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Official transcripts are \$2.00 each and must be sent directly from the Registrar's office, in accordance with TEA regulations. Unofficial transcripts are \$1.00. There is no charge for transcripts that can be sent electronically via TReX to Texas Universities and Colleges.

Name and Address of College or Scholarship	FOR OFFICE USE ONLY Send to:	Transcript Type	
		Official	Unofficial
College/Scholarship _____ Address _____ City _____ State _____ Zip _____	Counselor/ College and Career Office		
College/Scholarship _____ Address _____ City _____ State _____ Zip _____	Counselor/ College and Career Office		
College/Scholarship _____ Address _____ City _____ State _____ Zip _____	Counselor/ College and Career Office		

Cypress Park High School has my permission to release my scholastic transcript, including any and all test scores, when requested by a University, College, and/or business for employment.

\_\_\_\_\_  
 \*PRINT Requestors Name Requestors Signature Date

<b>FOR OFFICE USE ONLY</b>		
Date: _____	Fee paid: \$ _____	Received by: _____