



CONSENT TO RELEASE STUDENT TRANSCRIPT TO A POSTSECONDARY INSTITUTION OR ATHLETIC PROGRAM

Student's Information

Name at Time of PSD School Attendance:

Last Name

First Name

MI

_____/_____/_____
Date of Birth

PSD ID

Current PSD School

YES NO
IB – Poudre High School Only

Transcript Information

Official Transcripts are \$3 each per the District-wide student fees Board adopted schedule*

**Certain fees/charges may be waived for students eligible for free or reduced-price meals under the federal income poverty guidelines in accordance with the Waiver Code column of the schedule. The District's Permission to Share Information for Fee/Charge Waiver and Programs to Receive Goods and Services form must be completed each school year. If sending to more than one institution using the Common App or Coalition App, transcripts will be a one-time \$3 fee.*

Poudre School District Official Transcripts include the following information:

- Legal name as it appears in Synergy, the District's Student Information System
- PSD ID and Colorado State ID
- Primary home address and phone number
- Date of Birth
- Gender
- Grades, weighted and unweighted cumulative averages: Policy IKC
- Names of past schools and years of enrollment
- Class rank: high school transcripts only
- Advanced placement (AP) and International Baccalaureate (IB) class designation
- Enter and leave dates if applicable
- Graduation date if applicable
- Graduation requirements: Policy IKF

SAT/ACT TEST SCORES WILL NOT BE ON TRANSCRIPTS PER SB20-175

- Poudre School District may release my/my student's transcript one (1) time.
- Poudre School District may release my/my student's transcript multiple times as grades and information changes.

Authorization to Release Records

By signing below, I authorize the appropriate office/official at Poudre School District R-1 to release my transcript to the postsecondary institution(s) or athletic program (s) listed below subject to the terms specified in this consent.

SELECT ONE:

- I am the **student** named above and plan to apply/ to enroll in /attend the postsecondary educational institution(s) listed below.

Signature: _____ Date: _____

- I am the **parent/guardian** of the above-named student who plans to apply to/enroll in/ attend the postsecondary educational institution(s) listed below.

Print Name: _____

Signature: _____ Date: _____



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Postsecondary Institution to Whom the Transcript is to be Released

Postsecondary institution/NCAA/ NAIA

____ Yes ____ No
Common Application

____ Yes ____ No
Coalition Application

Special Instructions/Deadlines:

Postsecondary institution/NCAA/ NAIA

____ Yes ____ No
Common Application

____ Yes ____ No
Coalition Application

Special Instructions/Deadlines:

Postsecondary institution/NCAA/ NAIA

____ Yes ____ No
Common Application

____ Yes ____ No
Coalition Application

Special Instructions/Deadlines:

Postsecondary institution/NCAA/ NAIA

____ Yes ____ No
Common Application

____ Yes ____ No
Coalition Application

Special Instructions/Deadlines:

OFFICE USE ONLY

Date received: _____

Stamp/initial if payment/waiver processed: _____

Notes:

THIS ORIGINAL FORM MUST BE PUT IN THE STUDENTS CUMULATIVE ACADEMIC FILE OR SENT TO THE POUDRE SCHOOL DISTRICT RECORDS DEPARTMENT – MARKED FOR DISCLOSURE