**12TH GRADERS ONLY**

**IS YOUR APPLICATION PACKET FOR COLLEGE COMPLETE?**

**STUDENT’S PART OF THE APPLICATION**

**Application completely filled out-no blanks**

**Release information form signed by parents/**

**Guardian and included**

**Brag sheets completed, if a recommendation is needed by the Counselor**

**$2.00 for each transcript to be sent**

**Check for application fee, stapled to application**

**All essays and activity sheets attached**

**PROCESSING TIME LINE FOR COLLEGE APPLICATIONS**

**AND SCHOLARSHIPS**

**Give applications(s) to Mrs. Campana in the Guidance Office**

**Mrs. Campana will process then give to your counselor to check and complete package; Applications returned to Mrs. Campana; Mailed**

**10-12 days to be processed and mailed**

**\*\*\*\*\*Electronic Applications\*\*\*\*\***

**You must notify the guidance department by submitting**

**a confirmation page and then following the same**

**procedure as above – but no fee involved**

**j0234069**

**Is your application packet for college complete**

SOUTH EUCLID-LYNDHURST CITY SCHOOLS

Permission to release student information

It is the policy of the South Euclid-Lyndhurst City Schools to release information concerning our students to various agencies and other third parties provided that proper authorization is obtained. We shall not release any information from our records unless proper authorization is obtained. We shall not release any information from our records unless such authorization is provided. Those able to give this authorization are: parents, (custody is required in separated families) and guardians of students who are unmarried and under eighteen years of age or older.

I hereby authorize the South Euclid-Lyndhurst City School to release information from

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s permanent record to those colleges or agencies as indicated below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of Graduation:\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: Relationship to student:

PLEASE RETURN THIS FORM TO YOUR GUIDANCE COUNSELOR: ALSO INCLUDE A $2.00 FEE TO PROCESS EACH TRANSCRIPT.