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OUR MISSION IS STUDENT SUCCESS...ACADEMIC, ARTISTIC, AND HUMANISTIC

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Phone: 242-7682      Fax: 256-6580      Website: [www.sotarochester.org](http://www.sotarochester.org)

**SCHOOL OF THE ARTS DISTRICT TRANSCRIPT RELEASE FORM**  
**For the Class of 2020**

Name: \_\_\_\_\_

Student ID#: \_\_\_\_\_ Counselor: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Allow **5** School Days to Process Your Request

I give permission for my transcript to be sent to “Colleges I’m Applying to”

Signature: \_\_\_\_\_

Parent/Guardian Signature (if under 18):

\_\_\_\_\_

Parent/Guardian Name (Printed):

\_\_\_\_\_

**FOR ALL COLLEGE APPLICATIONS**

I added these colleges to “Colleges I’m applying to”  
and requested my transcript in Naviance Family  
Connection

I signed my electronic FERPA waiver in the  
Common Application

*Official SAT/ACT test scores must be requested and sent  
through: [collegeboard.org](http://collegeboard.org) and/or [actstudent.org](http://actstudent.org)*