

# Transcript Request Form



College Placement Office  
Central Catholic High School  
4720 Fifth Avenue  
Pittsburgh, PA 15213

Phone: 412-208-3447  
Fax: 412-208-0554

Please return form to College Placement Office - Fee for each Transcript Request is \$5.00

Name \_\_\_\_\_  
Last First Middle

Year of Graduation: \_\_\_\_\_ Home Room (if current student): \_\_\_\_\_

I authorize Central Catholic High School to release an  Official  Unofficial transcript to:

Name of School / Organization: \_\_\_\_\_

Address or Fax Number: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Purpose of Transcript Request:  College Application  Summer Program  Job Application  
 Scholarship Application  Other \_\_\_\_\_

Have you already completed and submitted the application?  YES  NO

Application Type:  Early Action  Early Decision  Regular Decision  Rolling Admission

Application Deadline: \_\_\_\_/\_\_\_\_/\_\_\_\_

What other materials are required by this college/scholarship to complete their application?

Counselor Recommendation – please list counselor: \_\_\_\_\_

Teacher Recommendations – please list teachers: \_\_\_\_\_  
\_\_\_\_\_

Counselor Form/Secondary School Report  Essay  SAT Scores

Is the \$5.00 Transcript Fee included with this form? (Transcript will be held until payment received)

Yes  No

Do you authorize Central Catholic to release ALL standardized test scores along with your transcript?

Yes  No – if you select 'no' we will not release any test scores

Student Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\*\*\*\*No transcript will be mailed before this form is completed in entirety and the Transcript Fee is received\*\*\*\*

\*\*\*\*Official Transcripts are not released to College Admission Offices until AFTER Labor Day each year\*\*\*\*

\*\*\*\* We will not release any transcripts if you still have financial obligations to Central Catholic\*\*\*\*