

Transcript Release Form

Mail this form to your *high school*
(include any required fees)

In order to finalize your acceptance to Rowan College of South Jersey, you must submit an official high school transcript or its equivalent to the Office of Admissions. **It is the student's responsibility to make this request.**

Please complete the following form and send it to your school of choice. Your high school may charge a fee for your transcript. In order to expedite this request, call your institution first regarding any fees and include your payment with this request form. *Be sure to print clearly.*

Last Name: _____ First Name: _____

Former Name (if applicable): _____

Street Address: _____

City: _____ State: _____ ZIP Code: _____

Date of Birth: _____/_____/_____
Month Day Year

Name of School: _____ Year of Graduation (if applicable): _____

I authorize my high school to mail a current, official transcript and, if necessary, a final, official transcript after graduation to:

Rowan College of South Jersey
Office of Admissions, Gloucester Campus
1400 Tanyard Road
Sewell, NJ 08080

Student's Signature: _____ Date: _____