



Brainerd Campus  
 501 West College Drive  
 Brainerd, MN 56401-3900  
 1-800-933-0346 or  
 218-855-8031  
 Fax: 218-855-8269

Staples Campus  
 1830 Airport Road  
 Staples, MN 56479-3252  
 1-800-247-6836 or  
 218-894-5100  
 Fax: 218-855-8269

## Request For Official High School Transcript

**STUDENT NOTES:**

**STUDENT PLEASE CHECK ONE:**

- STUDENT IS APPLYING TO CENTRAL LAKES COLLEGE FOR UNDERGRADUATE STUDIES, AFTER HIGH SCHOOL GRADUATION  
 STUDENT IS APPLYING TO CENTRAL LAKES COLLEGE FOR PSEO OR CIS CONCURRENT STUDIES/STILL ATTENDING HIGH SCHOOL

**SEND THIS FORM TO YOUR HIGH SCHOOL.** Check with your high school prior to submitting this form—several high schools are now using “Parchment Transcript Services”.

**HIGH SCHOOL NOTE:** If the student is still in high school and is applying for Undergraduate Studies—PLEASE WAIT to send high school transcript until after completion of high school—with the HIGH SCHOOL GRADUATION DATE LISTED.

DATE: \_\_\_\_\_

I authorize \_\_\_\_\_ High School in \_\_\_\_\_  
(name of high school) (city and state)

to release my official transcript to Central Lakes College.

Name: \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)

Name during high school attendance: \_\_\_\_\_

Year of Graduation or Last Year Attended: \_\_\_\_\_

Student Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Student’s Current Contact Information:

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Current Address: \_\_\_\_\_

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

Student’s Signature \_\_\_\_\_ Date: \_\_\_\_\_