

Mid-Year Grades: Opt Out Form

Student Name: _____

Date: _____

Counselor: _____

By signing this form, you are requesting the School Counseling office to **NOT** send an updated transcript with Semester 1 grades to colleges **that have already received your initial transcript.**

Do not send Mid-Year grades to:

All colleges (please check) _____

or

Specific Colleges (please list) _____

(Be advised that this opt-out form does NOT apply to initial transcripts sent to additional colleges in the future. Initial transcripts to additional colleges will include all grades completed as of the time of your application.)

Student Signature

Parent Signature

Date

This form is due to the School Counseling office no later than

Tuesday February 7th, 2017 at 7:30am