

Clarkstown High School South
School Counseling Center
31 Demarest Mill Road
West Nyack, NY 10994
845-624-3413 845-624-3418 Fax

Transcript Release Form-Former Students

Date	<input type="checkbox"/> Date of Graduation _____		
	OR		
	<input type="checkbox"/> Last Attended _____		
Telephone #	Date of Birth	Social Security #	
Last Name	First Name	Maiden Name	
Address	City	State	Zip

Are you requesting SAT scores be sent?
(If they have been released to South HS by you) **Yes** **No**

Please send a copy of my records to: (Please give full address of college/university)

Student or Guardian's Signature