

# Record Request/ Release Form



Developmental Research School  
at the University of Florida

Today's Date: \_\_\_\_\_ Current Grade/Graduation Year: \_\_\_\_\_

Student Name: \_\_\_\_\_

Person requesting record (if different): \_\_\_\_\_

Email (not @pkyonge.ufl.edu address) \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Record Requested: \_\_\_\_\_

Please send my records to (circle one):

College    Scholarship    School    Employer    Student/Parent/Guardian\*    Other

Recipient Name: \_\_\_\_\_

Address/Fax: \_\_\_\_\_

Please send my records by (check all that apply):

Pick Up Unofficial\*\* Transcript – Student or Parent/Guardian Only

Regular US Mail (first 5 transcripts are free, \$5 assessed for each transcripts after the 5th)\*\*\*

Electronic transfer – no fee (via F.A.S.T.E.R. or SPEEDE/EXPRESS only)

Fax (if available) – no fee – Faxed transcripts are automatically unofficial.

**Common App, Coalition, SendEDU — DO NOT FILL OUT THIS FORM**

Portals notify your counselor, transcripts are sent on your behalf.

Note: It is the responsibility of the student/parent to verify that records have been received.

By signing this form, I hereby authorize P.K. Yonge to release my requested records to the above-named party. I understand that this authorization can be revoked at any time upon subsequent written request. Unless otherwise noted, permission is granted to forward test scores including, but not limited to: SAT, PSAT, SAT subject tests, ACT, & AP exams.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Parent/guardian may not sign to authorize release of records if student is over 18 years of age.

\*\*All transcripts must be sent directly from P.K. Yonge by mail or electronic transfer to be official. Faxed or hand-delivered transcripts are considered unofficial copies.

\*\*\*A fee of \$5 will be assessed for every transcript sent via US Mail after the 5th transcript – exact cash, or check made payable to the University of Florida, preferred.

**OFFICE USE ONLY:**

Date received: \_\_\_\_\_ Date of completion: \_\_\_\_\_ Completed by: \_\_\_\_\_ Payment method \_\_\_\_\_.