

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) **This is NOT email.
- Upload to Skyward Portal** for digital access (same location as report cards). After graduation, you will no longer have access, so you will need to download and save. This is an unofficial transcript.
- 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 _____

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