

COLLEGE UNDERGRADUATE TRANSCRIPT REQUEST FORM

Please forward a current official transcript in a sealed envelope by March 13, 2023 to: (Outside of U.S. students that do not receive transcripts, should submit official documents/reports that contain your past three years of examination results/grades)

The Brunswick Sons & Daughters Scholarship Program
PO Box 648
Naperville, IL 60566

(We accept electronic transcripts from services like Credentials Solutions and Parchment which should be emailed to info@brunswicksonscholarships.com)

Overnight deliveries (FedEx, DHL, etc) should use the following shipping address:

The Brunswick Sons & Daughters Scholarship Program
1848 Syracuse Rd.
Naperville, IL 60565

| | | | |
|------------------------|-----------------|------|-------|
| Applicant Name | Student ID# | | |
| Applicant Phone Number | Applicant Email | | |
| Employee (Parent Name) | Division/Group | City | Email |

OUTSIDE OF U.S. STUDENTS ONLY: School Official: please complete the following and attach an official report which contains the students past three years of grades and/or examination results by 3/13/2023. You must also provide a grading scale.

Predicted university entrance examination results for:

☐ International Baccalaureate ☐ A-level examinations ☐ Matura ☐ Other National Exam _____

If actual examination results are available, please enter them in the box below.

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student if he/she is 18 years of age or older, or the consent of his/her parent if the student is under the age of 18.

Therefore, if you are under 18, your parent must also sign this form.

"I, hereby, consent to allow my (son's/daughter's) school to release all pertinent scholastic and educational information regarding me (my son/daughter) requested below and contained herein to properly complete The Brunswick Sons & Daughters Scholarship Program Application."

| | |
|--|------|
| Applicant Signature | Date |
| Parent /Guardian Signature (if applicant is under 18 years of age) | Date |