

TRANSCRIPT RELEASE FORM

The following student has applied to North Florida Baptist College for admission for the Fall/ Spring of 20____. He is requesting that his college/high school transcript be sent to the Admissions Office at North Florida Baptist College.

PERSONAL INFORMATION (to be completed by applicant):

Name: _____ DOB: ____/____/____

Address: _____

City: _____ State: _____ Zip: _____

Social Security Number: ____-____-____ Date of Birth: ____/____/____

Graduation Date: _____ Semester/Year last attended: _____

Name at time of enrollment if different from above: _____

I grant permission and make request for my school, _____
(School Name)

(Address) (City) (State) (Zip)

to send my academic transcript and personal records to:

**Admissions Office
North Florida Baptist College
12046 Normandy Blvd.
Jacksonville, FL 32221
Phone: (855) NFBC-4-ME**

Please include A.C.T., I.Q., and other standardized test scores, if available.

Student's Signature: _____

Parent's Signature: _____

(Required if the student is under 18 years of age)

SPECIAL NOTE TO HIGH SCHOOLS

If this student is currently a high school senior, please send us a partial transcript of his first seven semesters. Upon the student's graduation, please send the transcript of his final semester so that we will have a COMPLETE transcript on file. The transcript must include the student's date of graduation and total number of units of credits to be considered final. Please include the official school seal/signature.

