

COLLEGE REPORT COVER SHEET

FOR COMMON APPLICATION FOR TRANSFER

Instructions for students: Fill out this cover sheet with the accurate information for all schools / programs that require you to submit the College Report. Attach this form to the College Report Form after filling out the "To the Applicant" section.

Effective Summer 2019: Cost per request: \$3 Regular-10 working days, \$10 Rush- 2 working days
Important note: No college reports will be processed until all financial obligations within the Los Angeles Community College District are paid.

For Admissions & Records: Please complete the "To the College Official" section of the attached College Report form and mail a copy of the form to each of the schools / programs that the student listed below.

Last Name	First Name	Middle Initial	Student ID Number
Address Street	City	State	Zip Code
Maiden or Other Names	First Semester of Attendance	Email Address	Date of Birth
<p>I understand that: The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The information contained in the College Report can only be released to third party with an Authorization to Release Information Form signed by the student (per transaction). I understand that the College Report will be released when this request is submitted and will not be held for grades, petitions or graduation. It is my responsibility to ensure that all grades are posted, any petitions approved and noted on my record, and that I am in good academic standing prior to submitting this request.</p>			
Signature of Student		Today's Date	Phone Number

Total Number of Copies of College Report Requested:

If requesting more than one College Report, please see page 2 of this form for the mailing address information for the additional programs/schools.

REQUEST 1
<p style="text-align: center;">SEND TO:</p> <p>ATTN: ADDRESS:</p> <p style="text-align: center;">STREET:</p> <p>CITY, STATE, ZIP:</p>
<p>FOR ADMISSIONS & RECORDS OFFICE USE ONLY</p> <p>Processor: Date Mailed</p>

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Additional copies of College Report Requested

REQUEST 2	
SEND TO:	
ATTN:	
STREET:	
CITY, STATE, ZIP:	
FOR ADMISSIONS & RECORDS OFFICE USE ONLY	
Processor:	Date Mailed

REQUEST 3	
SEND TO:	
ATTN:	
STREET:	
CITY, STATE, ZIP:	
FOR ADMISSIONS & RECORDS OFFICE USE ONLY	
Processor:	Date Mailed

REQUEST 4	
SEND TO:	
ATTN:	
STREET:	
CITY, STATE, ZIP:	
FOR ADMISSIONS & RECORDS OFFICE USE ONLY	
Processor:	Date Mailed