

TRANSCRIPT RELEASE FORM

Date: _____

RECORDS OFFICE:

I hereby authorize you to release my official transcript to Manor College. Please forward the document to the address below:

Admissions Office
MANOR COLLEGE
700 Fox Chase Road
Jenkintown, PA 19046-3399

Thank you for your prompt attention in this matter.

Sincerely,

Please print your name

Signature

Year of Graduation/Date(s) of Attendance

Date of Birth

Social Security No.