



Cleveland, Ohio
Founded 1929

Release of School Information

I give my permission to: _____
Name of High School

For the release of my complete transcript of grades and test scores, including the SAT and/or the ACT, and teacher/counselor recommendations to the Lebanese Syrian American Junior League for their use in considering my application for Scholarship.

STUDENT Name: _____

STUDENT Signature: _____

DATE: _____

official sealed copies if mailed or sent from school secured electronic delivery

*This form is for the use of the student if necessary to request information from their high school – it does **not** need to be returned to the LSAJL Scholarship committee.*