



Cleveland, Ohio
Founded 1929

Release of School Information

I give my permission to: _____
Name of School

For the release of my complete transcript of grades 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 college – it does **not** need to be returned to the LSAJL Scholarship committee.*