



**Admissions & Records Office
Transcript Authorization of Release Form**

Student Information Section

(PLEASE PRINT CLEARLY AND INCLUDE COMPLETE ADDRESS WITH ZIP CODE)

Name: _____ **Student ID#:** _____

Address: _____

City/State/Zip: _____

Phone #: _____ **Alternate Phone #:** _____

Note: Please ensure that your information is legible and your complete address is included. Authorizations that are incomplete will not be accepted and will delay your transcript pick up.

Transcript Authorization Release Section

(Please read carefully and ensure all required information is included)

I, _____ authorize _____ to pick up my official transcript from the Admissions & Records Office at Napa Valley College. I understand that this designee will need to have proper identification with them at the time of pick up. I also understand that if this designee does not have proper identification with them at the time of pick up, Admissions & Records will not release my transcript. I further understand that this designee will have access to my personal information and I release Napa Valley College from all responsibility and/or liability in the event that my information is misused.

Student Signature

Transcript Designee Signature

Date
