



TRANSCRIPT AUTHORIZATION

I, _____, over 18 years of age,
from the graduating class of _____

or

I, the parent/guardian of _____
from the graduating class of _____

hereby grant permission to Lititz Christian School
to forward transcript materials (ie: grades, class rank, test scores, etc.) to:

Parent or Student over 18 signature

Date

It is the student's responsibility to follow up with the institution within 1 week of this request to verify that the transcript has been received.