



**Lynchburg Regional Governor's  
XLR8 STEM Academy**

**Authorization to Release Educational Records**

**Student Information**

Last Name \_\_\_\_\_ First \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Base High School \_\_\_\_\_

I hereby authorize the home high school (indicated above) to release a transcript of the educational records of the above named student to:

***Central Virginia Community College  
XLR8 STEM Academy  
3506 Wards Road  
Lynchburg, VA 24502***

A complete transcript includes the following components:

- The student's academic record of courses taken and grades earned,
- A listing of all course credits attempted and completed,
- A cumulative grade point average,
- The student's rank in class, and
- Standardized test scores—this may include the SAT 1, SAT 2, and/or ACT.

Please note that school and community activities, honors, and counselor comments may also be included.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_