



NAVIANCE AUTHORIZATION (STEP 2)

Student Name: _____ School Counselor: _____

College / Common App Email: _____ (Not CBSD)

By signing below, I acknowledge and consent to the following:

☐ I authorize Central Bucks West to release the following to all colleges, NCAA, scholarships, and enrichment programs, as needed: *Official Transcripts, Secondary School Report, Recommendations, Mid-year, Final grades, and the School Profile.*

☐ Sending transcripts and/or recommendations requires at least **15 school days** to process after requests are submitted through **Naviance**. This form is not a transcript request.

☐ I must complete the Counselor Recommendation Survey in **Naviance** for my School Counselor to write a recommendation. (Login to **Naviance**: Click on your initials —> Surveys from Your School!).

Failure to complete this survey will result in a delay in writing / sending a recommendation letter.

☐ Recommendations and Secondary School Reports are confidential and personal in nature; I hereby **waive my right** to view any of these college application documents, at any time.

☐ Admissions decisions are based on what schools have received at that time. If I add, drop, or change my Senior year classes, it is my responsibility to notify each college to which I have applied.

**THIS FORM AUTHORIZES US TO SEND YOUR APPLICATION DOCUMENTS.
YOU MUST STILL ADD TRANSCRIPT REQUESTS IN NAVIANCE (STEP 3).**

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Office received: _____