
DATE

I authorize **WESLEYAN UNIVERSITY** to release my official transcript to the individuals and/or organizations referenced in order number _____.

The information contained in this transmission may contain privileged and confidential information. It is intended only for the use of the person named below and the National Student Clearinghouse. If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution, or duplication of this communication is strictly prohibited. If you are not the intended recipient, please destroy all copies of the original message.

NAME

SIGNATURE

Fax to: 1-703-742-4238 (IMPORTANT, remember to dial 1-703 first)

**Or mail to: National Student Clearinghouse, 2300 Dulles Station Boulevard, Suite 300,
Herndon, VA 20171**

Or email scanned copy of signed consent to: consent@studentclearinghouse.org