

Transcript Consent Form

If your child is entering St. Charles Catholic as a new student for the 2023–2024 school year it is your responsibility to read, sign and return the Transcript Consent Form on next page.

State law requires that you make an election at the beginning of this year whether you give or deny consent for this school to collect your child's Personally Identifiable Information (including their social security number) and disclose it to the Louisiana Office of Student Financial Assistance (LOSFA) for TOPS and other financial aid or to the state's colleges and universities for admission purposes. We are no longer allowed to provide your child's transcript to LOSFA and the Institutions without your permission on file.

You only have to complete and sign this consent form once; it will stay on file for as long as your student is enrolled at St. Charles Catholic High School.

Please see the Transcript Consent Form on next page and sign the portion of the form that applies to your decision to grant or deny consent.

Please put your child's grade number on the top right-hand corner.

You are required to return the completed Transcript Consent Form on Retreat Day.

ST. CHARLES CATHOLIC HIGH SCHOOL

*100 Dominican Drive
LaPlace, Louisiana 70068-3499
Telephone (985) 652-3809
www.stcharlescatholic.org*

**TRANSCRIPT CONSENT FORM
TOPS, COLLEGE SCHOLARSHIPS, GRANTS, AID PROGRAMS & COLLEGE ADMISSIONS**

If you consent, your child's data will be shared with the Louisiana Office of Student Financial Assistance (LOSFA) through the Louisiana Department of Education (LDE) and its technology partner, the Office of Technology Services (OTS) and the postsecondary education institution(s) to which your child applies through the Board of Regents (BOR), LDE, and OTS to allow:

- You to **track your child's progress** in taking the courses and earning the grades required to be eligible for a Taylor Opportunity Program for Students (TOPS) Scholarship by having an account on Louisiana Connect (www.LouisianaConnect.org).
- LOSFA to determine **whether your child is eligible for TOPS and other college aid using the Louisiana Award System (LAS)**.
- You to **monitor your child's TOPS eligibility status** by having an account on LAS (www.osfa.la.gov/Award System/).
- LOSFA to **make TOPS and other aid payments**.
- The Institution(s) to process his/her application for admission.

The data which is necessary to determine your child's eligibility for TOPS and for admission to an Institution and which may be shared with LOSFA and Institutions for these purposes includes:

- Student transcript data (includes but not limited to courses taken, type of course, the grades for each course, and when and where the courses were taken.)
- Full Name
- Birthday
- Social Security Number

LDE and OTS will not have access to students' personally identifiable information to facilitate this process.

If you do not consent to the disclosure of your child's data to LOSFA and to postsecondary Institutions, the evaluation of your child's eligibility for TOPS and for admission to college will be delayed until the information necessary to make a determination is provided.

 I CONSENT to my child's school collecting my child's personal information named above and disclosing the personal information collected to LOSFA, to the Institution, and to the entities named above. I understand and acknowledge that the consent provided herein shall be valid for my child's cumulative transcript records as of the date of signature and shall remain valid and in effect until he/she graduates from high school or I withdraw consent by completing the bottom portion of this form and returning it to my child's school.

Signature of Parent/Legal Guardian

My Child's Full Name

Printed Name of Parent/Legal Guardian

Date

 I DO NOT CONSENT to my child's school collecting my child's personal information named above and disclosing the personal information to LOSFA and BOR. I understand that I may provide consent at a later date by completing the consent portion of this form above and returning it to my child's school.

Signature of Parent/Legal Guardian

My Child's Full Name

Printed Name of Parent/Legal Guardian

Date