



University of Houston-Victoria



Office of the Registrar & Student Records: 3007 N. Ben Wilson, Room 129 ▪ Victoria, TX 77901
Phone: 361-570-4368 ▪ Fax: 361-580-5545 ▪ studentrecords@uhv.edu

Permission to Release Education Records to Victoria College

By completing and signing this form, you are agreeing that all transcript and application records that you submitted to UHV will be electronically transferred from UHV to VC because you are now interested in taking classes offered by VC. Please note that submitting this form or having your records transferred to VC does not guarantee admission into VC.

You can continue taking courses at UHV and/or complete your degree at UHV if you choose to do so.

- Complete the "Requested By" section and sign this form. Electronic signatures are not accepted.
- Your request will be processed within three business days.
- Submit completed/signed form in person or to the mailing address, email address, or fax number listed above.
- To send a UHV official transcript, you must not have any active holds that prevent a transcript from being released.

Requested By (To Be Completed By Student):

Release To (Recipient):

Admissions

Last Name		First Name	
UHV-ID Number		Date of Birth	
Today's Date		VC-ID Number	
Phone Number		Email Address	

Victoria College
Organization / School
admissions@victoriacollege.edu

Education record information to be released:

Admissions application, all transcripts from the institutions I attended and for which UHV has kept a record, all test scores related to Admissions such as TSI Assessment or exemption scores, and an official UHV transcript. **Please note that only transcripts from other UH campuses we have on file will be sent. If you need complete records from other UH campuses, please contact them directly.*

Purpose of release – This permission statement must be checked for us to release your records.

These records are being released so that I can submit my application for admission to VC. UHV is asking that these records be electronically sent. Please send them to the email address listed above.

_____ I give permission for UHV's Registrar's Office to release the specified information and grades to VC.

Only check the following if it applies to you:

_____ Hold for grades _____ Hold for degree

_____ I will be dual enrolled at UHV and VC and give UHV permission to release my transcripts at the end of each semester I have attended.

_____ I have requested my documents from UHV to be sent before. Please only send my UHV transcript.

Student Signature _____ Date _____

OFFICE USE ONLY

ACTION TAKEN: Processed/Transferred Held Other _____