

HIGH SCHOOL/GED TRANSCRIPT RELEASE PERMISSION

Note to applicant: Tear off, sign and send or give directly to last high school attended. Your transcript cannot be sent without signed permission.

I, (Student Name) _____, hereby request _____ School
to send a High School transcript, GED record, and/or IEP to: _____ Last High School Attended

Name of Technical College Campus _____

Name Used on School Transcript _____

Address _____

Year Graduated or Last Attended _____

City _____ State _____ Zip Code _____

Date of Birth _____ Social Security Number _____

Applicant's Signature _____ Date: _____

Parent's Signature (if applicant is under 18) _____ Date: _____