

School District of Green Lake

612 Mill Street / P.O. Box 369 Green Lake, WI 54941 Phone (920) 294-6411 FAX (920) 294-6589

AN ENVIRONMENT OF EXCELLENCE

RELEASE OF TRANSCRIPT INFORMATION

I, _____

hereby authorize Green Lake Public School to release my transcript and/or recommendation information to the following colleges/employers:

Please records you are requesting:

PROGRESS RECORDS

_____ Statement of Course Taken

_____ Grades

BEHAVIORAL RECORDS

_____ Standardized Achievement Tests (ACT/SAT/PSAT)

Signature of Parent/Guardian/Adult Student: _____

Date: _____

Daytime Telephone # for questions regarding this release: _____