

Taft Union High School
701 Wildcat Way
Taft CA 93268
661-763-2322 Fax-661-763-4736

AUTHORIZATION TO RELEASE PUPIL INFORMATION

State School Code Section 49075 provides that a school district may permit access to pupil records to any person for whom a parent of the pupil has executed written consent specifying the records to be released and identifying the party or class of parties to whom the records may be released. By law, students must give the school permission to have **ALL** Exam Grade Labels placed on their permanent record and this information given to colleges, SAT, PSAT, ACT, GSE, AP Exam and CSU-EAP/STAR.



Yes ____ No ____

Please release a copy of the mandatory permanent record of the following student:

Date _____

First **Middle** **Last** **Current Student ID#**

Other name known by Birth Date

Grad Year _____

Former Student ____ Last year attended ____

Transcript Requesting Official ____ Unofficial ____

Request of Delivery Mail ____ Pick-Up ____

Mail to: _____ Address: _____

Reason for Request _____ Scholarships & Transcripts for College



Signature **Eligible Student* Parent/Guardian** **Phone Number**

*Eligible student is one who has attained age 18 or is an emancipated minor or is attending an institution of post-secondary education.