## RAMAPO INDIAN HILLS REGIONAL HIGH SCHOOL DISTRICT Guidance Department

## **VERIFICATION & BLANKET AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS**

TUDENT NAME:	DATE:
transcript provided. I hereby authorize the all the institutions and/or scholarship ser requesting the information for athletic or	d student, I have verified the accuracy of the unofficiane Guidance Department to release his/her transcript file to rvices designated by my son/daughter, and to any college admission purposes during the current school year. I an record of grades, letters of recommendations, and a school
I understand that:	
1. Mid-year grades will be sent to comailing procedures.	lleges, providing the student has followed the transcrip
	ns processed by the Guidance Department, students MUST r at least TWO WEEKS prior to any deadline date and by s.
I hereby release the Ramapo Indian E providing the information requested.	Hills Regional High School Distric for any liability for
	Parent/Guardian Signature
TRANSCRIPT WILL BE MAILED UNTIL TH	HIS FORM IS SIGNED AND RETURNED TO GUIDANCE
nave read the above information and I understa ailed unless the form is completed and <u>RETUR</u>	and the contents. I also realize that <u>NO</u> information will be <u>NED TO GUIDANCE</u> .
	Student Signature