

## Permission to Release Records

I hereby authorize Tippecanoe School Corporation to release my high school transcript and/or health and immunization record to the party I designate. These records could include basic identifying information, courses and grades, credits, cumulative GPA, test scores, graduation date, and health and immunization records.

### Release my (select one):

- Transcript
- Health and Immunization Record

### Release my records to:

- Self
- School or Business, via:  Mail  E-Mail  FAX
- Parent/Guardian (please list): \_\_\_\_\_

### Send my records to:

Name of School/Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
E-Mail address: \_\_\_\_\_  
FAX: \_\_\_\_\_

### Former Student Information:

Maiden Name: \_\_\_\_\_  
Current Name: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Current Phone Number: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Year of Graduation: \_\_\_\_\_  
TSC School Attended: \_\_\_\_\_  
Purpose of Request: \_\_\_\_\_

### Print this document, sign and date

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(if student is under the age of 18)*

### **Office Use Only**

\_\_\_\_\_ \$2.00 processing fee applies per copy for personal or employer copies; maximum payment collected \$10.00  
\_\_\_\_\_ Processing fee waived (current student, higher education, scholarship)

Tippecanoe School Corporation  
21 Elston Road, Lafayette, IN 47909  
E-Mail: transcript@tsc.k12.in.us  
Phone: 765-474-2481 FAX: 765-474-0533