

STUDENT RECORDS RELEASE REQUEST

I GIVE Temple College permission to release the following records to the person (s) listed below:

___ All records at Temple College (academic, disciplinary, financial, etc.)

Or just the following:

___ Grade Reports (including test scores)

___ Absentee Reports

___ Disciplinary Reports

___ Other – List: _____

The information indicated above may be released to:

Name(s) _____
Company _____
Address(es) _____

Student Name Printed

Social Security Number or Student No.

Student Signature

Date

**This form does not affect access to student directory information. Directory information is available to all persons unless specifically restricted by the student.*