

Inglemoor High School

Northshore School District No. 417 15500 Simonds Road NE Kenmore WA 98028 425.408.7219



CONSENT TO RELEASE STUDENT RECORDS FROM INGLEMOOR HIGH SCHOOL

Notice: Student records obtained under this request remain subject to the requirements of the Federal "Family Educational Rights and Privacy Act of 1974," which requires "written parent (if student is under 18) or student consent before the record may be shared with any other party.

Inglemoor High School may release the following student records: (Please Print)

Last Name	First Name		Middle Initial	Maiden Name (if applicable)
Street Address			City/State/Zip	
Grad Year or Intended Grad Year		Birthdate		Cell Phone
If you want your transcript mail	ed somewhere ot	her than you	r home address	, please list the address belo
Name of Institution:		Name o	f Institution:	
Attn:		Attn:		
Street Address:		Street A	ddress:	
City/State/Zip:		City/Sta	te/Zip:	
Total number of transcripts re		r email addr	ess:	
Signature required	•			Date
Office Use Only	Prepared By			Date