



**Innovation Lab High School**  
 Northshore School District No. 417  
 2020 224th Street SE  
 Bothell, WA 98021  
 425-408-6201

**CONSENT TO RELEASE STUDENT RECORDS FROM INNOVATION LAB 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.**

**Innovation Lab High School may release the following student records:**

Last Name	First Name	Middle Initial	Maiden Name (if applicable)
Street Address		City/State/Zip	
Grad Year or if not a graduate, last year attended	Birthdate	Cell Phone	

**If you want your transcript mailed somewhere other than your home address, please list the address below:**

Name of Institution:	Name of Institution:
Attn:	Attn:
Street Address:	Street Address:
City/State/Zip:	City/State/Zip:

**Total number of transcripts requested \_\_\_\_\_**  
**If you want an unofficial pdf please include your email address: \_\_\_\_\_**

Signature required \_\_\_\_\_ Date \_\_\_\_\_

<i>Office Use Only</i>	Prepared By _____	Date _____
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