

EDUCATIONAL RECORDS CONSENT & RELEASE FORM



For Post-Secondary Applications

In order for LOLHS to be able to release transcripts or other educational records for the purpose of application to college, explicit written consent must be given by a parent/guardian of a student under the age of 18 prior to the release of any educational records. Please complete and return this form as soon as possible. Please call the School Counseling office if you have any questions.

Name of Student

2026
Year of Graduation

I consent to the release of student information and educational records by Lyme-Old Lyme High School blanket permission for the purpose of the college application process. It is my understanding that “educational records” include the following items:

- Official Secondary School Transcript;
- Secondary School Report form;
- Senior Year 1st Quarter Grades will automatically be sent to applicants’ schools unless otherwise requested in writing; (obtain the appropriate form from Ms. Goss in the School Counseling Office)
- Senior Year Mid-Year Grades;
- Final Transcript to the college/technical/vocational/military/PG program you will attend;
- Oral communication with college admissions personnel.

*Specific written request must be made for any other items to be included.

*Special Education records must be requested through the Department of Special Services.

* 3rd quarter grades will only be sent by specific written request.

Signature of Parent/Guardian

Date

Please return this form to the School Counseling Office as soon as possible. No records will be released without this returned signed form.



**Lyme-Old Lyme High School
FERPA Consent, Release & Waiver for Letters of Recommendation(s):
College, Scholarship, Honors, Special Programs & Employment**

Teachers and counselors completing evaluations, statements and letters of recommendation often wish to reference certain information such as grades, GPA or class rank contained in a student's education record. In order to do so, it is necessary that parent(s)/guardian(s) and students consent to the release of such information, and therefore, parent(s)/guardian(s) and students making such requests are asked to complete this consent and release form and return it to the School Counseling Office.

Furthermore, colleges and universities prefer that teacher/counselor evaluations, statements and letters of recommendation be confidential. Colleges generally believe that recommendations written with this understanding are more candid and honest. Therefore, those recommendations have more merit and carry more weight in the admissions process than recommendations which parent(s)/guardian(s) and students can access. Similarly, scholarship, honors and special program selection committees, as well as future employers prefer recommendations which honestly reflect the individual. In accordance with this sentiment, we encourage all students/parents requesting letters of recommendation to waive the right to inspect and review confidential letters and statements of recommendation by completing the waiver portion of this form below. If you choose not to waive your rights to inspect and review statements or letters of recommendation, you should understand that a Lyme-Old Lyme High School faculty member has the right to decline your request for a recommendation.

Consent to Release of Student Information by School Counselor/Teacher in Statement or Letter of Recommendation Regarding College, Scholarship, Honors, Special Programs & Employment Applications

We, _____ (student and parent(s)/guardian(s)), request that the following Lyme-Old Lyme High School faculty members:

complete a statement or letter of recommendation and/or other evaluations associated with my future employment, college, scholarship, honor or special program application. We authorize and acknowledge that student information such as grades, GPA or class rank may be included in this letter of recommendation or other application forms. We understand, upon our request, this letter may be used for additional recommendation purposes.

Waiver of Right to Inspect and Review School Counselor/Teacher Statement or Letter of Recommendation Regarding College, Scholarships, Honors, Special Programs & Employment Applications

In addition to our consent and release of student information as described above,

_____ We **DO** waive our rights to inspect, review or obtain a copy of the letter(s), statement(s), rating sheet(s) or other evaluation(s) requested.

_____ We **DO NOT** waive our rights to inspect, review or obtain a copy of the letter(s), statement(s), rating sheet(s) or other evaluation(s) requested.

Printed Name of Student

Printed Name of Parent/Guardian

Signature of Student

Signature of Parent/Guardian

Date

Date