

PARKWAY NORTH HIGH SCHOOL

TRANSCRIPT AND RECOMMENDATION RELEASE

Both sections must be signed for any submission of an official transcript or submission of counselor/teacher recommendations

2014-2015 TRANSCRIPT RELEASE

The official transcript reports courses and grades earned beginning in the student's freshman year of secondary school (whether Parkway North or a previous school) as well as summer school and correspondence courses. The transcript also includes an accumulative grade point average (weighted and un weighted)

Standard test scores are also included with the transcript. Parkway North includes all ACT and SAT results unless notes are given under "Special Instructions" on the Application Data sheet.

I give my permission for the Guidance Office to send my official Parkway North High School transcript to any college, university, or scholarship program I request throughout the 2014-2015 school year.

Student Signature: _____

Date: _____

Print Student Name: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

(Required if student is not yet 18 years of age)

2014-2015 COUNSELOR RECCOMENDATION WAIVER

Sign the waiver below, regarding any letters of recommendation or secondary school reports. By waiving your right, "YOU allow the college specialist and teachers to write a complete assessment of your performance and abilities. If you "waive your right" on this form (which you are encouraged to do), you should also "waive your right" on any college applications you complete.

If a college or university asks about suspensions/discipline, we will disclose any out-of-school suspensions and/or other serious infractions. It is in your best interest to self-disclose these infractions when asked on the application. Please contact Christy Wills or Tiana Jones (314-415-7681) if you have any questions or concerns.

As conferred by the Family Educational Rights and Privacy Act of 1974, I recognize the confidential nature of the teacher and/or college specialist letter of recommendation and

____ I do ____ do not **waive my rights to access contents of all the letters of recommendation.**

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____