

TOMS RIVER HIGH SCHOOL NORTH  
1245 OLD FREEHOLD ROAD  
TOMS RIVER, NEW JERSEY 08753

**TRANSCRIPT  
RELEASE FORM**

Today's Date \_\_\_\_\_

Re: \_\_\_\_\_  
NAME (To be filled in by student)

Class of: \_\_\_\_\_

Dear Student and/or Parent:

The Elementary and Secondary Education Act of 1974 requires you be notified that a transcript has been requested by a college, high school, prospective employer, armed forces, or a federal, state or local branch of our government.

Rather than delay the mailing of a transcript and possibly adversely affect you or your child's application, we are asking that this form be completed and returned to the Guidance Office.

I give my permission to Toms River High School North to: (please check one)

☐ Parent to check if student is under 18 A. Send transcript to any federal, state or local branch of government, educational institution (college, high school or post-secondary education institution) or prospective employer that my child requests. I am aware that this request must be submitted in writing.

☐ To be checked if person is over 18 B. Send transcripts to any federal, state or local branch of government, educational institution (college, high school or post-secondary educational institution) or prospective employer that I request. I am aware that I must submit this request in writing.

\_\_\_\_\_  
Signature of Parent (if student is under 18)

\_\_\_\_\_  
Signature of Student (if 18 or over)

Please return this form to the GUIDANCE OFFICE as soon as possible.

(#202A)