

**EATON HIGH SCHOOL
AUTHORIZATION TO RELEASE RECORDS**

I give permission for Eaton High School to release the below listed records to Colleges,
Universities and any Scholarships that _____ has
(Student Name)
made application to. I understand that the first transcript is sent at no charge and there is a \$2.00
fee for transcripts thereafter. The following will be released:

Name and Address	Subject, grades, credits
Grade point average	Class rank
Attendance records	Standardized test records
Teacher and/or counselor recommendations	

(Parent signature)

(Date)

(Student Signature if over 18 yrs. old)

(Date)