

**WALNUT HILLS HIGH SCHOOL**  
**3250 Victory Parkway**  
**Cincinnati, OH 45207**  
**513-363-8400**

**Request for Permission to Release School Records**

This signed form authorizes the release of school records.  
Please complete and return to the Guidance Office.

Date \_\_\_\_\_

Name of Student \_\_\_\_\_ DOB \_\_\_\_\_

Student's Social Security # \_\_\_\_\_

I understand that seniors will be charged for certain transcripts as outlined in Senior Bulletin #1.

Parent/Legal Guardian Signature \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Email \_\_\_\_\_

Student Signature \_\_\_\_\_

**Records Authorized for Release:**

- Transcript
- All summary information contained in cumulative, health and confidential records.
- Only the following information \_\_\_\_\_

**Reason for Release:**

- College Application
- NCAA Clearinghouse
- Scholarships
- Armed Services
- Other \_\_\_\_\_

These records cannot be further transferred without written consent from the parent, legal guardian, or student over 18 years of age.

The Guidance Office must receive all release requests at least two weeks prior to the applicable deadline. Walnut Hills High School cannot guarantee timely processing of requests received with less than two weeks notice.