

SOUTH BUTLER COUNTY SCHOOL DISTRICT

Knoch High School
345 Knoch Road
Saxonburg, PA 16056
Fax 724.352.0160

REQUEST FOR DISCLOSURE OF RECORDS
FOR GRADUATES OR FORMER STUDENTS

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name used while a student at KHS \_\_\_\_\_
(If different from above)

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Year of Graduation \_\_\_\_\_

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The purpose of this disclosure is: (please check one)

[ ] College/school admissions [ ] employment [ ] other

PLEASE NOTE: Any transcript that you personally hand-carry with you to a college/school district/employment or is sent to a home address will be "UNOFFICIAL".

An "OFFICIAL" transcript (with the school seal on it) must be sent by Knoch High School directly to the college/school or employment.

If you desire and OFFICIAL transcript to be sent, please fill in the information below:
Names and addresses where you want transcript(s) sent:

- 1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

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\_\_\_\_\_
Date

\_\_\_\_\_
Signature of Requestor

\_\_\_\_\_
Date

\_\_\_\_\_
Signature of Parent (if required)