## RIVERSIDE | BROOKFIELD HIGH SCHOOL

DISTRICT 208 160 RIDGEWOOD ROAD RIVERSIDE, IL. 60546-2408

## RECORDS RELEASE AUTHORIZATION FORMER STUDENTS

STUDENT SERVICES TEL: 708-442-8401 FAX: 708-447-3280

Name:		
FIRST	MI	LAST (While you were attending RB)
BIRTHDATE:		TODAY'S DATE:
PHONE NUMBER:		CLASS OF:
<u>By s</u>	igning this form I ackno	owledge that I understand:
• <u>Transcripts and Immu</u> <u>are requested.</u>	nization records cannot	t be processed the same day they
• <u>I must allow up to ten</u>	<u>ı (10) school days for an</u>	official transcript to be processed.
	ot included on transcrip t is my responsibility to	ts for students graduating submit these directly.
Go to actstudent.org f	for ACT scores and colle	geboard.com for SAT scores
TO: CITY/STATE/ZIP:		STATE/ZIP:
STUDENT'S SIGNATURE:	STUDE	ENT'S SIGNATURE:
I have attached S	\$3.00 for each TRANSCRIF	PT and/or IMMUNIZATION request.
I HAVE ATTACHE	ED \$25.00 for Diploma rec	quest.
Total number of	transcripts/immunization	records.
	yable to: R.B.H.S. or pay	ment can be made by phone 708-442-7500 x2106 harta@rbhs208.net along with a copy of a photo ID
	THIS SECTION TO BE	COMPLETED BY RBHS
Date received from Student:	[	Date Mailed:
Comments:		