RELEASE OF SCHOOL RECORDS FOR FORMER STUDENTS

NAME (if married please put your maiden name also)

_____

YEAR OF GRADUATION (or year you left RPHS)

_____

Please print the following information below:

1) Name of Business or institution to which transcript is to be sent:

_____

_____

_____

_____

2) Full address of organization:

_____

_____

_____

_____

3) Sent to the attention of (if applicable):
Name of person:

_____

_____

_____ _____

Signature Date

wrb