

# SCHOOL RECORDS RELEASE FORM

## UNIVERSITY OF NORTHERN IOWA Educational Talent Search Program

800 Sycamore Street  
Waterloo, Iowa 50703-4730  
(319) 273-4772 (telephone) ▪ (319) 433-0160 (fax)

To the officials of: Waterloo Community Schools,

I hereby grant permission for the University of Northern Iowa Educational Talent Search Program (ETS) to have access to the records of \_\_\_\_\_, including the cumulative, quarterly  
Student Name (Please Print)

and semester grades, test scores, transcripts and class schedules, during their 6<sup>th</sup> -12<sup>th</sup> grade enrollment in the ETS program.

I understand my child's records will be kept in a confidential file and used for the following purposes only:

- To assist ETS personnel as they support my child's preparation for success in accessing and completing postsecondary education.
- To provide data to the U.S. Department of Education and to the University of Northern Iowa for the sole purpose of assessing the effectiveness of ETS in providing services to its participants.

**\*\*This records release form will be valid (6<sup>th</sup>-12<sup>th</sup> grade) or until the student has exited out of the program\*\***

I understand I may revoke this release at any time by submitting to the University of Northern Iowa ETS a dated, signed statement denying the release of secondary school records.

\_\_\_\_\_  
Parent/Legal Guardian Name (please print)

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

\_\_\_\_\_  
Student's School

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Student's School ID#

\_\_\_\_\_  
Date

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Home Telephone

\_\_\_\_\_  
Cell Phone

