



THOMAS JEFFERSON HIGH SCHOOL
 830 OLD CLAIRTON ROAD
 JEFFERSON HILLS, PA 15025
 PHONE: 412-655-8610
 FAX: 412-655-8618
www.wjhsd.net

WEST ELIZABETH - JEFFERSON HILLS - PLEASANT HILLS

PETE MURPHY

Principal

ADAM KNARESBOROUGH

Assistant Principal

ERIKKA KUSHE

Assistant Principal

HIGH SCHOOL TRANSCRIPT RELEASE FORM

Legal enrollment name:

Last (Maiden)	First	Middle
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Graduation Year: _____ Date of Birth: _____

_____ Authorization is granted for release and/or faxing of my high school transcript or information therein to ANY educational institution, scholarship committee, athletic inquiry, Armed Service Branch, or prospective employer upon their request.

Student Signature (if 18)	Parent/Guardian Signature (student under 18)
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Telephone Number	Date
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If you are a former student, please complete the section below and return the completed form to the Counseling Office at Thomas Jefferson High School. Thank you.

<u>Mail to (School/Agency)</u>	<u>Complete Address</u>

It is the policy of the West Jefferson Hills School District to not discriminate on the basis of sex, handicap, age, race, color, and national origin in its educational and vocational programs, activities, or employment as required by Title IX, Section 5904 and Title VI. For information regarding services, activities, programs, and facilities that are accessible to and usable by handicapped persons or about your rights or grievance procedures, contact the Director of Human Resources at 412-655-8450. 21-22