

Upward Bound Program

-- School Records Release --

I, _____, hereby consent to the release of my school records (including transcripts, report cards, test scores, evaluations, recommendations, and other information regarding my school performance) to Illinois Central College's Upward Bound Program. It also includes the exchange and/or release of educational information to the appropriate high school personnel. This release will be effective from this date and throughout my participation in the program.

I, _____, as the parent/legal guardian of the above student, do hereby consent to the release of the school records as noted above.

Student's Signature

Today's Date

Student's Social Security Number

Student's Date of Birth

Street Address

City, State, and Zip Code

Parent/Legal Guardian Signature

Today's Date