



Student Records Management
1211 Hawaii – Building A.
P.O. Box 650
Alamogordo, NM 88311

Office: (575) 812-6013
Fax: (575) 812-6003

Permission for Release of Confidential Information

Regular Education Transcripts Request

I hereby grant permission for Alamogordo Public schools to release my transcripts:

Name of Student/ Maiden (or other names used in school) _____

Date of Birth _____

Last Year Enrolled in Alamogordo Public Schools: _____

Date of Graduation: _____

Please check one: **Official Transcripts**
(stamped & sealed)

Unofficial Transcripts
(stamped Unofficial)

Other (be specific): _____

Released from:
Alamogordo Public School District
1211 Hawaii Avenue – Building A
Alamogordo NM 88310

Released to (name): _____

Or Mailed to:

Or Fax to: _____

Telephone#: _____

Date Requested: _____

Signature: _____
Student or Parent (If student is under 18 years of age)