**ALAMOGORDO PUBLIC SCHOOLS**

Student Records Management
1211 Hawaii – Building A
P.O. Box 650
Alamogordo, NM 88311
**irma.montoya@alamogordoschools.org**

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)