

# Dhahran High School TRANSCRIPT RELEASE FORM

**To the applicant:** Please complete the authorization below and deliver this form to your guidance counselor or registrar.

## AUTHORIZATION FOR RELEASE OF EDUCATIONAL RECORDS

\_\_\_\_\_  
Student Last Name  
(Please print)

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

\_\_\_\_\_  
Grade  
(current)

In accordance with federal regulations regarding the privacy rights of parents and students under The Family Educational and Privacy Act of 1974, the undersigned consent to the release of educational records to Dhahran High School. The applicant named above is applying for admission to Dhahran High School.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and address of school(s) from which records are being requested:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TO THE GUIDANCE COUNSELOR OR REGISTRAR:** The student named above has applied for admission to Dhahran High School. Please send us the following information as soon as possible:

1. A transcript of the student's record to date, including grades for courses in progress.
2. A copy of the student's complete test profile.

This information should be sent to:

**Admissions Office  
Dhahran High School  
P.O. Box 31677  
Al-Khobar, 31952  
Saudi Arabia**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date