TIDEWATER
COMMUNITY COLLEGE
From here, go anywhere.™

Upward Bound, Portsmouth Campus

7000 College Drive Portsmouth, VA 23703 (757) 822-2625 FAX: (757) 822-2184

Authorization for Release of Cumulative Record / Transcript

To: _____Middle School / High School

My child, _____, attends the above - named high school and has applied to participate in the Upward Bound Program at Tidewater Community College, Portsmouth Campus. An evaluation of his / her Middle School/High School record is needed for acceptance and continued participation in the program.

I HEREBY REQUEST THAT HIS/ HER OFFICIAL TRANSCRIPT, GRADE REPORTS AND TEST SCORES BE SENT TO:

Upward Bound Program
Tidewater Community College
Portsmouth Campus
7000 College Drive
Portsmouth, VA 23703

I give permission for the Middle School/High School my child attends/will attend to send official transcripts, grade reports and test scores as requested by the Upward Bound staff for purposes of record-keeping and tracking.
I also give permission for the Upward Bound staff to review my child school records.

_____	_____	_____
Print Student Name as it appears on permanent record	Date of Birth	Grade Level

_____	_____
Signature: (Parent/ Legal Guardian)	Date