

STUDENTS: Please have your parent or guardian sign this form as soon as possible. Return the form to the registrar in the counseling office where it will be kept in your senior folder.

This form with parent signature is only required ONE time. However, each request for transcripts to be sent to different colleges requires you to complete a TRANSCRIPT-REQUEST FORM (obtained in the counseling office or online).

GENERAL RECORDS CONSENT FORM

STUDENT NAME:

(LAST) _____ (FIRST), _____ (MI) _____

I give permission for Jamestown High School to release high school record data (official transcripts, test information, forms required by colleges, recommendations on file) ON REQUEST for the purpose of job placement, military recruitment, athletic requirement, college applications, scholarship applications, etc.

I understand that I, or my child, must fill out a TRANSCRIPT REQUEST form with Jamestown High School Registrar for EACH transcript needed for different colleges.

Student Signature:

Date

Parent Signature:

(Required for students under the age of 18)

Date



Williamsburg-James City County Public Schools
School Board & Central Office
P.O. Box 8783 • Williamsburg, VA 23187
Phone: (757) 603-6400 | wjccschools.org

Secondary School Transcripts and College Performance-Related Standardized Tests (SATS, ACTS)

Opt- Out Form

8VAC20-160 Regulations Governing Secondary School Transcripts mandates that local divisions include a student's test record, to include at least the highest score earned, on college performance-related standardized tests such as the SAT and ACT on the student's secondary school transcript. In December of 2016, an amendment was enacted that granted parents, guardians, or others having legal control or charge of a child the ability to elect in writing to have their child's test record excluded from the student transcript (opt out).

If you **do not** wish for your child's college performance-related standardized test scores such as the SAT and ACT to be included on his/her secondary school transcript, **please check the following box and return this form to the Registrar of the school your student attends.** You do not need to return this form if you wish to include your child's test record on his/her secondary school transcript.

- I do not wish to have my child's record of college performance-related standardized tests such as SAT and ACT included on his/her secondary school transcript.

____/____/____
Date

Student Name *(Please print)*

School

Parent/Guardian Name *(Please print)*

Parent/Guardian Signature