



Office of the Registrar
 3640 Colonel Glenn Hwy.
 Dayton, OH 45435-0001
 (937) 775-5588
 FAX: (937) 775-5597
 e-mail: registrar@wright.edu
 http://www.wright.edu/registrar

PARENT/GUARDIAN REQUEST FOR RELEASE OF GRADES

I am requesting a copy of the grades of:

NAME OF STUDENT (PLEASE PRINT)	STUDENT UID	DATE
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This information may be transmitted by mail or in person. A new authorization form must be completed for each request made.

I have claimed and will continue to claim the above student, who has received at least one-half of his or her support from me during the current taxable year, as a dependent pursuant to Section 152, Title 26, U.S. Code. I have provided a copy of my most recent Federal Income Tax form which shows the above named student as my dependent.

I have provided photo identification for myself.

SIGNATURE OF REQUESTING INDIVIDUAL	TYPED OR PRINTED NAME
	RELATIONSHIP TO STUDENT
REQUESTOR'S ADDRESS	PHONE

Notary Certification is required unless form is presented in person at the Office of the Registrar.

State of: _____ County of: _____

Before me, a Notary Public, in and for the said state, personally appeared _____
Print Name

who acknowledged the signing thereof to be his/her voluntary act and deed for the uses and purposes therein.

Sworn to me and signed in my presence this
 _____ day of _____, 20____.

Affix notary
 Seal

Notary Signature	Print Name or stamp	My Commission expires _____
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OFFICE USE ONLY		
Information Released	Staff Initials	Date Released