

Hingham High School
School Counseling Department
17 Union Street
Hingham, MA 02043

Heather Rodriguez
Director, K -12



School Counselors

Jessica Gawel
Bianca George
Erin Krall
Kelly McPeck
Cheryl Rapoza
Cathleen Savery

Hingham High School - Records Release Form

GRADUATES

Please submit this form to Mrs. Stanley at dstanley@hinghamschools.org or fax: 781-741-1515

Student Name: _____ **YOG:** _____

School Transferring from: _____

Reason for transfer? _____

I hereby authorize Hingham High School to release my high school transcript to:

COLLEGE FULL NAME: _____

How would you like the transcript sent? Please check off **ONE** option and fill in the requested information.

Mail:

Address: _____

Attention: _____

City: _____ State: _____ Zip: _____

Email:

Email address: _____

Fax to the school:

Fax number: _____ Attention: _____

Signature of student
Must be signed before processing

Today's Date