



**marchman**  
**TECHNICAL COLLEGE**

## RELEASE OF RECORDS

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ DOB: \_\_\_\_\_

The student listed above has applied for admission to Marchman Technical Education Center. Please send the following requesting student records:

Transcript of Grades	T.A.B.E. Scores
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Please forward all records to: Marchman Technical College  
7825 Campus Drive  
New Port Richey, FL 34653

<http://www.fkmtc.edu>

Telephone: (727) 774 - 1700  
FAX: (727) 774 - 1791

If records are not available at your school, please advise.

These records will be for the professional use of authorized Pasco County personnel only. Please be advised that parental permission is no longer required when authorized educational personnel request records (FERPA Fed. Reg. v.41 no. 118 p. 24273 June 17, 1976).

\_\_\_\_\_  
Parent/Student Signature

\_\_\_\_\_  
Authorized Signature