



# TALCOTT MOUNTAIN ACADEMY of Science, Mathematics & Technology

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www.talcottacademy.org

Talcott Mountain Academy of Science, Mathematics & Technology  
Montevideo Road  
Avon, CT 06001

## Release Form for Student Transcripts

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

I authorize the \_\_\_\_\_ to  
release the following information to the Talcott Mountain Academy of Science, Mathematics and  
Technology.

\_\_\_\_\_ Academic Transcripts (Test scores, grades) –copies

\_\_\_\_\_ Health Records-copies

\_\_\_\_\_ Psychological Reports-copies

\_\_\_\_\_ Discipline Reports-copies

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Present Grade Level

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

*Please mail or deliver this form to your child's current school.*