



RELEASE OF STUDENT INFORMATION TO HIGH SCHOOL

Admissions & Records Office
1500 College Parkway
Elko, Nevada 89801

Phone: 775.

◆ Fax: 775.

◆ Email: admissions@gbcnv.edu

Student Name (please print): _____

6 W X G H Q W V 6 L J Q D W X U H _____

Date of Birth or GBC Student ID: _____

My signature indicates my permission for Great Basin College to release my academic records to the high school listed below until further notice, and allows direct contact with my instructor(s) and the Admissions & Records Office.

Name of High School: _____

Notice to Party Receiving Records: This information is intended only for the institution listed above. It may contain information that is privileged, confidential, or otherwise protected from use and third party disclosure. You are hereby notified that any review, disclosure, copying, or dissemination of this information, or the taking of any action reliant on the contents, or other uses is strictly prohibited.