

LAKE ERIE
COLLEGE
OFFICE OF THE REGISTRAR

AUTHORIZATION FOR RELEASE OF EDUCATIONAL INFORMATION

To: The Lake Erie College Registrar

You are hereby authorized to furnish and release to my high school counselor all grades for courses taken at Lake Erie College under the post secondary enrollment option for which I am seeking high school credit.

The foregoing authority shall continue in force until revoked by me in writing.

I unconditionally release Lake Erie College from all liability that might result from furnishing this information.

Signature of Student

Date

Office of the Registrar
391 W. Washington Street
Painesville, Ohio 44077
440.375.7015