



1375 California Avenue, Windsor, Ontario. N9B 2Z8
Tel. 519 254 6451 Fax. 519 254 9872



Release of Information (please print clearly)

Official Transcript: \$10.00, OSR Documents: \$10.00, Replacement Diploma: \$25.00

I hereby authorize Westview Freedom Academy to release school records concerning myself. Please note Government issued photo ID will be required upon pickup.

Full Name used while attending high school (First, middle and last name)			
Date of Birth			
Current Mailing Address (Address, city, province, postal code)			
Telephone & Email address			
Signature & Date			
(Please select),	Century	Forster	Westview Freedom Academy
Last School & year attended	Year:	Year:	Year:
	W.M. Hands	Cal-Tec	Shawnee
	Year:	Year:	Year:
Notes to Office			
<u>FOR OFFICE USE ONLY</u>			
Paid in Full: _____ Yes _____ No			
Completed by: _____ Date Picked up: _____			