



**YOUTH  
LEADERSHIP  
ACADEMY**

**SCHOOL RELEASE FORM**

I. Permission is hereby granted to the appropriate office of

\_\_\_\_\_

MIDDLE SCHOOL OR HIGH SCHOOL

to issue an academic transcript for

\_\_\_\_\_

STUDENT NAME

\_\_\_\_\_

Student's School ID #

II Permission is hereby authorized to the Youth Leadership Academy for the release of requested information from authorized officials who maintain my educational records for the academic year of 2022-2023.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Name (if student is under 18)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

Youth Leadership Academy is a 501c3 non-profit organization.  
Please email transcripts to [admin@ylacademy.org](mailto:admin@ylacademy.org).