

ACTIVITY SHEET

HIGHLIGHT YEARS OF PARTICIPATION FOR ALL APPLICABLE SCHOOL ACTIVITIES

NAME: _____

YEAR OF GRADUATION: _____

– Academic Team	9 10 11 12	– National Art Honor Society	9 10 11 12
– a Capella	9 10 11 12	– Peer Tutoring	9 10 11 12
– Anime	9 10 11 12	– Pep Band	9 10 11 12
– Baseball	9 10 11 12	– Retina Yearbook	9 10 11 12
– Book Club	9 10 11 12	– Relay for Life	9 10 11 12
– Boys Basketball	9 10 11 12	– Robotics	9 10 11 12
– Boys Lacrosse	9 10 11 12	– Set Design	9 10 11 12
– Boys Soccer	9 10 11 12	– Ski Club	9 10 11 12
– Boys Swimming	9 10 11 12	– Softball	9 10 11 12
– Boys Tennis	9 10 11 12	– Spartan Singers	9 10 11 12
– Cheerleading, Fall	9 10 11 12	– Sp Needs Volunteer	9 10 11 12
– Cheerleading, Winter	9 10 11 12	– Spartan Steppers	9 10 11 12
– Chorus	9 10 11 12	– Stage Crew	9 10 11 12
– Chronicle Newspaper	9 10 11 12	– Student Council	9 10 11 12
– Class Officer	9 10 11 12	– Student Council Officer	9 10 11 12
– -Office_____		– -Office_____	
– Cross Country	9 10 11 12	– Students for Equity & Acceptance	9 10 11 12
– Culture Committee	9 10 11 12	– Sustainability Club	9 10 11 12
– DECA	9 10 11 12	– Sweethearts	9 10 11 12
– Diving	9 10 11 12	– Symphonic Band	9 10 11 12
– Dramatics	9 10 11 12	– Thespians	9 10 11 12
– Environmental	9 10 11 12	– Track, Spring	9 10 11 12
– Esports	9 10 11 12	– Track, Winter	9 10 11 12
– Field Hockey	9 10 11 12	– Tri-M	9 10 11 12
– Football	9 10 11 12	– Unified Social Leadership Club	9 10 11 12
– Game Club	9 10 11 12	– Unified Sports	9 10 11 12
– Girls Basketball	9 10 11 12	– Voices of Excellence	9 10 11 12
– Girls Lacrosse	9 10 11 12	– Water Polo	9 10 11 12
– Girls Soccer	9 10 11 12	– World Language Club	9 10 11 12
– Girls Swimming	9 10 11 12	– Wrestling	9 10 11 12
– Girls Tennis	9 10 11 12	– Youth & Gov't	9 10 11 12
– Golf	9 10 11 12		
– Interact	9 10 11 12		
– International Affairs	9 10 11 12		
– Jazz Band	9 10 11 12		
– Mock Trial	9 10 11 12		
– Morning News	9 10 11 12		

SCHOOL DISTRICT OF SPRINGFIELD TOWNSHIP
Montgomery County, Pennsylvania

**Permission to Release Permanent School Records to
Post-secondary Institutions (colleges, universities, technical schools)
or other School Districts**

Dear Parent or Student:

In order to protect the right of privacy for the student we request permission before we release the school records listed.

Please indicate by checking below that you are willing for the school to comply with requests for the school records listed from colleges, schools of higher learning, or other school districts.

_____ **Standardized Achievement Tests**

_____ **Counselor Comments**

_____ **Official Administration Record (name, address, birthdate, academic work completed, marks, attendance and discipline record)**

_____ **Health Data**

Date of Graduation _____

Student's Name

Student's signature

Date

Parent's signature if student is under 18 years of age

Records Sent To: _____

Date _____

Date _____

Date _____

Directions: A parent, guardian and/or student must complete this form before academic records can be released.

Current Address: _____

Current Telephone No: _____