

Indiana Association of Building Officials, Inc.
4000 W. 106th Street, Suite 125-234, Carmel, IN 46032
(317) 824-0940 Fax (317) 429-1270 director@iabo.com

Applicant's Full Name: _____

The individual above wishes to be considered for the Herman H. Darlage Memorial Scholarship offered through the Indiana Association of Building Officials, Inc. Please release transcripts for this purpose, and return to student in a sealed envelope or forward to the address below, along with a signed copy of this form to:

Penney Barton
PO Box 314, Newport, IN 47966
Phone: 765-492-5343; Fax 765-492-5341

MATERIALS MUST BE RECEIVED BY JUNE 1st TO ASSURE CONSIDERATION OF THIS APPLICANT

PARENT/GUARDIAN PERMISSION STATEMENT: I hereby give permission for (school name)

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to release the most current transcripts of grades for the applicant named above.

Name of Parent or Guardian:

Signature of Parent or Guardian:

_____ Date:

TRANSMITTAL STATEMENT

I hereby certify that the attached is a true and actual copy of the most current transcript of the Applicant named above.

Name of School Official:

Title: _____

Signature of School Official: _____