

**REQUEST FOR STUDENT RECORDS**

TO: Deputy Superintendent  
OR  
Principal of \_\_\_\_\_ School

RE: NAME OF STUDENT: \_\_\_\_\_

BIRTHDATE OF STUDENT: \_\_\_\_\_

This is your authority to provide to \_\_\_\_\_  
(name of official, if available)  
of \_\_\_\_\_ any information he/she  
(name of school/company/institution)  
may request relating to myself, or my son, or my daughter (please circle one only).

The information that may be released shall include, but is not limited to, all information relating to my/his/her schooling including all school records, scholastic marks, progress notes, reports of any aptitude, intelligence and/or psychological testing, opinions and any other knowledge and information which is relevant to myself/my son/my daughter.

\_\_\_\_\_  
Name of Parent/Guardian (please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

OR

\_\_\_\_\_  
Signature of Requesting Student (if over the age of 16)

PLEASE INDICATE THE MAILING ADDRESS TO WHICH  
THE INFORMATION SHOULD BE FORWARDED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_