

RELEASE OF SCHOOL RECORDS

STUDENT NAME: _____ DOB: ___/___/___

CURRENT GRADE: _____

I hereby authorize _____ to release to

Moriah Central School:

- Current grades from the last marking period to withdrawal date
- Copy of current schedule
- Copy of most recent report card
- Student Transcript or Permanent Record Card
- All Standardized Testing Data
- Psychological Testing
- Current IEP
- Health Records

Parent Signature

Please fax to: Guidance – (518) 546-7895