

Russell Elementary School

Peter Helgerson
Principal

*A Community of Caring where caring, respect, responsibility, trust
and family are*

195 School Street
Rumney, NH 03266
(603) 786-9591
FAX (603) 786-9626

RELEASE OF RECORDS—INCOMING STUDENTS

Student Name: _____

Present Grade: _____

Date: _____

Federal laws prohibit the public schools from releasing student records to another school and/or agency without the written consent of the student's parent, or guardian. In order for us to be able to send for your child's records, it is necessary that you sign this permission form.

Your signature below authorizes us to send for your child's standardized test results, transcripts, special education assessments and educational plan, health records, and any other pertinent information concerning your child's educational plan. Prompt forwarding of such records will make the transition from one school to another school as smooth as possible.

Signature of Parent/Guardian: _____

Name of school the student is transferring from: _____

Address of school: _____

City: _____ State: _____ Zip: _____

Telephone number: _____ FAX: _____