STUDENT RECORDS INFORMATION RELEASE

This is to authorize "To Whom It May Concern" to disseminate the indicated student record information of the student names to the third party listed below.

Student				DOB:	_ YOG:
	Last	First	Middle	mm/dd/yy	
Student				Date:	
	Siį	gnature			
Parent				Date:	
	Sig	gnature			
Parts of Record to be Released:				Permission Granted	Permission Denied
Special Ed	ucation Recor	ds			
Transcript Information (Including identifying information, course titles, grades, and grade level completed)					
SAT and College Board Scores					
Extracurricular Activities					
Teacher and Counselor Evaluations & Comments					
Attendance Record					
Health Record					
Other (Spe	ecify):				
IMPO		ou have the right to receive th Georgeto Attr 1	etown Middle-High Scho	ool. nd written request to:	ntion or withdrawal
Third Part	y(s) – Specify	Name, Address, & A	ffiliation:		