

Unified School District #368

Paola, Kansas 66071

REQUEST FOR RECORDS

AUTHORIZATION FOR RELEASE OF INFORMATION

Student Name: _____ Current Grade: _____

Date of Birth: _____

Is this student currently on IEP Individual Education Plan? ___Yes ___No

Does this student have a 504 Plan? ___Yes ___No

Is this student currently in a long-term suspension or expulsion situation? ___Yes ___No

Last School Attended:

School Name _____

Address City, State _____

Fax/Phone _____

I hereby authorize and request you to release information regarding my child to USD 368, Paola High School. That information includes all official records: **State ID#, withdrawal grades, transcript, assessment scores, attendance records, disciplinary records, test results, health records, athletic eligibility, special education records, psychological test results** and any other data directly related to this student. I also authorize you to release any information regarding my child to any Guidance or Administrator of Paola USD 368.

Parent or Guardian's Signature

Date



REGISTRAR:

Please send records to: Paola High School
Linda Rice, Registrar
401 N. Angela Dr
Paola KS 66071
Phone: 913-294-8017
Fax: 913-294-8011
linda_rice@usd368.org

Office Use Only:
Date Requested: _____
Requested By: _____
Date Received: _____