



# RELEASE OF STUDENT RECORDS

I (parent/guardian), \_\_\_\_\_, hereby give permission to have the permanent and temporary records released for:

Student's Name: \_\_\_\_\_.

Check all that apply:

<input checked="" type="checkbox"/>	Official Transcripts	<input checked="" type="checkbox"/>	Achievement Test Scores
<input checked="" type="checkbox"/>	Report Cards	<input checked="" type="checkbox"/>	Cummulative Records
<input checked="" type="checkbox"/>	Health & Immunization Records	<input checked="" type="checkbox"/>	Other:
<input checked="" type="checkbox"/>	IEP/ Accommodations		

**LAST SCHOOL ATTENDED:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FORWARD TO:**

Liberty Christian School  
 301 W. Normantown Rd, Romeoville, IL 60446  
 Email: [www.grace-romeoville.org](http://www.grace-romeoville.org)  
 PHONE: 1-815-290-9970 FAX: 1-815-390-1122

I understand and have been informed that I have a right to review all records on my child and am entitled to a copy of the records to be forwarded to the receiving party prior to their release. I have also been informed that I have a right to a hearing to contest any information obtained in my child's record prior to its release.

\_\_\_\_\_

Date of Release

\_\_\_\_\_

Signature of Parent/Guardian

**Note: It is not necessary for parents to sign a release when records are being passed from school to school. See Federal Register, June 17, 1976, Part II H.E.W. Privacy Right to Parents and Students. Vol.41, No. 118-24673.**