



## PARENT AUTHORIZATION FOR RELEASE/ REQUEST OF STUDENT RECORDS

**POWER CAMPUS – GRADES 7 - 12**

In accordance with the Family Educational Rights and Privacy Act of 1974 and AZ State Law, I hereby authorize the school named below to release the following student records:

Previous School Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Please send the following:

- Withdrawal Form
- Withdrawal Grades
- Transcript of Grades
- Attendance Records
- Achievement Test Scores
- Results of CogAt (or other gifted testing)
- Discipline Records (suspension/expulsion)
- SPED Records (IEP, 504, MET & Psych Reports)
- Psychological Records
- Health Records (Birth Certificate, Immunization Records, 45 Day Screening, Hearing & Vision Screening)

I understand that I have the right to inspect, copy or to challenge the contents of the records prior to the records being forwarded.

Name of Child	1.	_____	D.O.B.	_____	Grade	_____
	2.	_____	D.O.B.	_____	Grade	_____
	3.	_____	D.O.B.	_____	Grade	_____
	4.	_____	D.O.B.	_____	Grade	_____

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

*Federal Law 99.31 allows for educational records to be sent to other educational agencies without the parent's signature requirement.*

Please send records to:

San Tan Charter School  
3232 South Power Road, Gilbert, AZ 85234  
Office: 480-222-0811  
Email: mmavis@santancs.com

1<sup>st</sup> request \_\_\_\_\_ 2<sup>nd</sup> request \_\_\_\_\_ 3<sup>rd</sup> request \_\_\_\_\_