

PARENT AUTHORIZATION FOR RELEASE/ REQUEST OF STUDENT RECORDS

RECKER CAMPUS - GRADES K - 8

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 Schoo	l Na	me				
Address						
Telephone Number				Fax Number		
Please send the	e foll	owing:				
Wi Tra Att Acl Re: Dis SPI Psy He Scr I understand th	thdranscreenda hieve sults sciplii ED Re ychol alth reeni nat I I forwa 1.	ne Records ecords (IEP, ogical Reco Records (Bi ng) nave the rig	es ds Scores or other gifted to (suspension/ex) 504, MET & Psy ords rth Certificate, I	pulsion) ych Reports) mmunization Record opy or to challenge th D.O.B	ne contents o	eening, Hearing & Vision of the records prior to the Grade Grade
						Grade
Date Federal Law 99 signature requi		-	Parent Sig		r educational	l agencies without the parent's
Please send records to:				San Tan Charter School 3959 East Elliot Road, Gilbert, AZ 85234 Office: 480-222-0811 Email: cpage@santancs.com		
1st request			2 nd request	3 ^{rc}	request	