

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 School Name			
Address			
Telephone Number		Fax Number	
Please send the following			
 Discipline Rec SPED Records Psychological Health Record Screening) 	rades Grades Grades ecords Test Scores (At (or other gifted toords (suspension/ex) (IEP, 504, MET & Ps) Records Is (Birth Certificate,	pulsion)	-
Name of Child 1.		D.O.B	Grade
2		D.O.B	Grade
3		D.O.B	Grade
4		D.O.B	Grade
Date Federal Law 99.31 allows signature requirement.	Parent Si		nal 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	
1 st request	2 nd request	3 rd request	