

**PERRY LOCAL SCHOOLS  
AUTHORIZATION FOR RECORD RELEASE AND/OR  
INFORMATION FROM RECORDS**

NOTE: When submitted, this authorization will become a part of the student's permanent record in accordance with the Family Educational Rights and Privacy Act of 1974 and Board of Education Policy.

Student's Name:	Student Birthdate:	Grade last Attended:
Previous School District:		
Previous School Attended:		Last Attendance Date:
Previous School Address:		Withdrawal date from Previous School:
Previous School Phone:	Previous School Fax:	

School type (circle one)    Public    Private/Non-denominational    Parochial    Home School/Community School

The School/Agency is authorized to release the records listed below:

- a. Academic grades
- b. Attendance data
- c. Group administered achievement and/or aptitude test scores (i.e. OAT/OGT, Stanford, Terra Nova, etc.)
- d. Health data and/or medical reports
- e. Psychological reports
- f. Individually administered achievement and/or intelligence test (MFE)
- g. I. E. P./504
- h. Speech, language and/or hearing evaluation
- i. Limited English Proficiency Scores (OTELA) if applicable
- j. SAT, ACT, PSAT, PLAN Results
- k. SSID # Please send this number on a Post-It-Note attached to the first page.
- l. Other \_\_\_\_\_  
(specify)

The record indicated above is to be released to:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> <b>Perry Elementary School</b><br>Kindergarten – Grade 4<br>One Learning Lane<br>Perry, OH 44081<br>Phone 440-259-9600 Ext 9682<br>Priner@perry-lake.org | <input type="checkbox"/> <b>Perry Middle School</b><br>Grades 5-8<br>Two Learning Lane<br>Perry, OH 44081<br>Phone– 440-259-9500 ext 9582<br>Gossettl@perry-lake.org | <input type="checkbox"/> <b>Perry High School</b><br>Grades 9-12<br>One Success Blvd.<br>Perry, OH 44081<br>Phone 440-259-9300 ext 9383<br>Sorinea@perry-lake.org |
|---|--|---|

Reason for request: (please check)

- To aid in present and future educational decisions       Other \_\_\_\_\_  
(specify)

I hereby grant permission for release of information between the two parties.

\_\_\_\_\_  
Printed Name of Parent/Guardian/Student over 18 yrs of age      Signed Signature of Parent/Guardian/Student over 18 yrs. of age

Date: \_\_\_\_\_

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For School Use Only

Date Mailed to Previous School: \_\_\_\_\_ By: \_\_\_\_\_, Perry Board of Education