

S†. IRENAEUS PARISH SCHOOL

9201 Grindlay Street 廿 Cypress CA 90630-3076 廿 (714) 827-4500 廿 Fax (714) 827-2930 www.stischoolcypress.org 廿 office@stischoolcypress.org

AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS

(SCHOOL NAME)
(SCHOOL ADDRESS)
(CITY) (STATE & ZIP)
In accordance with the Family Educational Rights and Privacy Act of 1972 and California State Law, I hereby authorize the release to the below named school, all school records, including grades, health records, and any other developmental information regarding the below named student:
Name of Student
Date of Birth
Please send the above requested records to:
St. Irenaeus Parish School 9201 Grindlay Street & Cypress CA 90630-3076 Phone (714) 827-4500 FAX (714) 827-2930 email: llobasso@stischoolcypress.org
Completed by Mrs. Lily LoBasso (SCHOOL OFFICIAL PREPARING REQUEST)
Signature (SCHOOL OFFICIAL FORWARDING RECORDS) (DATE)