



## Request for Release of Student Records

<b>Name of Previous School:</b>	
<b>Address:</b>	<b>Phone:</b>
	<b>Fax:</b>

**I hereby authorize the release of my student's information, as noted below, to Arizona Autism Charter Schools.**

**STUDENT NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_

- AIMS/ AzMerit Student Report Information
- Official Transcript
- Attendance Records
- Test Scores
- Official Withdrawal Form
- Grades to Date of Withdrawal
- 4 – Year Plan
- All Special Education Records** (including IEP's, Psychological Records, Resource Support, etc.)
- Other \_\_\_\_\_

<b>MAIL TO (select campus):</b>	
<u>Elementary Campus</u> <input type="checkbox"/> Arizona Autism Charter Schools 4433 N. 7 <sup>th</sup> Street Phoenix, AZ 85014	<u>Upper Campus</u> <input type="checkbox"/> Arizona Autism Charter Schools 1445 E. Indian School Road Phoenix, AZ 85014

**SIGN HERE**

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please Note: Arizona School Districts are required to request records within 5 days of enrollment and to send records within 10 days after receiving a request. School (including private) may not withhold responding to the request due to financial obligation owed by the pupil or his/her parents as defined in A.R.S. 15-828-F. Also note; The Federal Family Education Rights and Privacy Act, Arizona Law, A.R.S. 15- 141, states that written consent of the parent/guardian is not required to release educational records to officials of other schools or school systems in which the student seeks or intends to enroll.

1<sup>st</sup> Request Sent \_\_\_/\_\_\_/\_\_\_      2<sup>nd</sup> Request Send \_\_\_/\_\_\_/\_\_\_      3<sup>rd</sup> Request Sent \_\_\_/\_\_\_/\_\_\_