

**EAST HAMPTON PUBLIC SCHOOLS**  
**East Hampton, CT 06424-1698**

**Phone: (860) 365-4020**

**Fax: (860) 365-4024**

**RELEASE OF STUDENT RECORDS**

I give permission to the East Hampton Public School System to obtain school records as indicated below:

**OBTAIN FROM:**

**RELEASE TO:**

\_\_\_\_\_  
*Specific Party or School*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City State Zip*

\_\_\_\_\_  
Memorial Elementary School

\_\_\_\_\_  
20 Smith Street

\_\_\_\_\_  
East Hampton, CT 06424-1698

Phone number: \_\_\_\_\_

Please release records for my child(ren):

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_

\_\_\_\_\_ Official Cumulative Record (name, address, birth date, grade levels completed, grades, standardized test scores, class standing, recommended placement, attendance records and home/school correspondence).

\_\_\_\_\_ Health Records and Medical Reports – including birth certificate, immunizations and physical examination records.

\_\_\_\_\_ Education/Speech/Hearing/Language Evaluations.

\_\_\_\_\_ Confidential Files – including PPT Minutes, IEPs, all reports and evaluations (including OT, PT, psychiatric, psychological, educational, speech, language), and records from – social workers, counselors, therapists, and educational consultants.

\_\_\_\_\_ Evaluations from outside agencies, doctors, schools.

\_\_\_\_\_ All prior records from school systems other than your district.

\_\_\_\_\_ Permission to communicate by telephone or to hold person-to-person conversations between former and new teacher/school representatives.

\_\_\_\_\_ Expulsion – If any of the above-listed students have been expelled from your school district, all records of the expulsion hearing.

\_\_\_\_\_ Other (specify)

Anticipated Date of First Day: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature - Relationship Reason for Request Date

This authorization is requested in compliance with Public Law 93-380, Family Education Rights and Privacy Act of 1974. Personal information shall be transferred to a third party only on the condition that such party will not permit any other party to have access to that information without the written consent of the parents/guardians or eligible student. Parental permission is not required when records are requested by authorized school personnel of the school system in which the student may intend to enroll.