

# Corydon Central Junior High School

377 Country Club Road \* Corydon, Indiana 47112

(812)738-4184 \* (812) 738-5752

## Authorization and Permission to Release Educational, Medical and/or Special Education Records

Student Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Previous School: \_\_\_\_\_

School Address: \_\_\_\_\_

School City, State, Zip: \_\_\_\_\_

School Phone Number: \_\_\_\_\_ School Fax Number: \_\_\_\_\_

My child is currently receiving special education services:

No

Yes

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

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### ATTN: SCHOOL REGISTRAR

We are requesting the following records for the student listed above (all the apply):

#### STANDARD RECORDS

- Transcript of grades
- Standardized test scores
- Health and Immunization records
- Attendance Records
- Withdrawal Grades
- Discipline

#### SPECIAL EDUCATION RECORDS

- Individualized Education Plan (IEP)
- Language Proficiency Testing/Individual
- Individualized evaluation records
- Eligibility Determination Documents (if Not embedded in another document listed above)

Send standard records to:  Elizabeth Klein Corydon Central Junior High School 377 Country Club Road Corydon, IN 47112 kleine@shcsc.k12.in.us	Send special education records to:  Theresa Pope Harrison County Exceptional Learners 121 High School Road Corydon, IN 47112 popet@shcsc.k12.in.us
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Requesting Signature: \_\_\_\_\_ Title: \_\_\_\_\_

(For Office Use Only)

Student's STN: \_\_\_\_\_

Date Requested: \_\_\_\_\_ Date Received from School: \_\_\_\_\_