



1212 E. Main Street
Plainfield, IN 46168
317-839-3713
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www.saintsusanna.com/school

**CONSENT FOR RELEASE OF STUDENT RECORDS TO
PARENT OR GUARDIAN**

The Parents of:

Student Name: _____ **Birthdate:** _____
Last First Middle

Record release to include the following:

- _____ Permanent Record including: student information, parent's name and address, students' race and ethnicity, birth certificate, custody and guardianship orders, report cards etc.
- _____ Test Data (ISTEP+, ECA, ACUITY, NWEA, etc.)
- _____ Health Records/Immunizations
- _____ Attendance Record
- _____ Discipline Record
- _____ Special Education files including current IEP (if applicable)
- _____ Psychological Evaluations (if applicable)
- _____ **Please copy all records listed above.**

Parent Signature: _____ **Date:** _____

Date Requested: _____
Date Received: _____