

# REQUEST FOR STUDENT RECORDS

**Frances C. Richmond School**  
**63 Lyme Road**  
**Hanover, NH 03755**  
**(603) 643-6040 - phone**  
**(603) 643-0662 - fax**

Today's Date: \_\_\_\_\_

Student's First Date of Attendance: \_\_\_\_\_  
(Richmond Middle School)

To Sending School: \_\_\_\_\_  
(Last school student attended)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_ has enrolled at the Richmond Middle School. This student was recently enrolled at your school. At your earliest convenience, please send the following information to us:

- |   |  |
|---|--|
| ___ Official Transcript                 | ___ Health Records with Immunizations                                |
| ___ Progress Report                     | ___ Disciplinary Records   |
| ___ Explanation of Grading System       | ___ IEP and/or Special Education Records<br>(most recent evaluation) |
| ___ Current Schedule and Grades to Date | ___ Test Scores  |
| ___ English/ Math Portfolios            | ___ Other pending information that may be helpful                    |

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## PERMISSION TO RELEASE RECORDS

I hereby grant permission for the release of records including psychological and/or intellectual evaluation regarding my child. I understand that all information will remain confidential and will be used for professional purposes.

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

*PLEASE NOTE: FERPA allows the disclosure of personally identifiable information (including information about a student's behavior that poses a risk to that student or other individuals) without parental consent if the disclosure is to officials of another school where the student seeks to enroll.*