

Student ID # \_\_\_\_\_



# PLAINEDGE PUBLIC SCHOOLS

District Administration Building  
241 Wyngate Drive, N. Massapequa, NY 11758  
(516) 992-7460 FAX (516) 992-7445

## REQUEST FOR RELEASE OF INFORMATION

Please fax all records to the Registrar's office at:  
FAX 516-992-7445

TO: \_\_\_\_\_  
Name of Prior School Attended Phone and fax #

\_\_\_\_\_  
Street Address City, State Zip Code

The following student has enrolled in the Plainedge Public School District?

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

We would appreciate you forwarding the following information to the registrar office:

- Report cards of current year
- Any science labs to date
- Transcripts/scholastic records including grades 6-8 (if applicable)
- Standardized test scores including grades 6-8 (if applicable)
- Attendance records
- Health records
- All NYS Regents Examination results including preliminary exams (if applicable)
- All Special Education/Section 504 records including tests and Individual Education Plans

### SCHOOL ATTENDING:

\_\_\_\_\_  
School Name

\_\_\_\_\_  
Street Address City, State Zip Code

Thank you for your prompt consideration of our request.

\_\_\_\_\_  
Parent/Guardian's Signature authorizing the release of records Date