

Sandwich Public Schools Phone: 508-888-1054

Authorization to Release Student Records

Student Name		Grade
Home Address before moving to Sand	dwich	
City	State	Zip Code
The above named student has e	nrolled in:	
Forestdale School, 151 Ro Phone: 508-477-6600, Fax		02644
Oak Ridge School, 260 Q Phone:508-833-0111, Fax:		d, East Sandwich, MA 02537
Sandwich Middle High So East Sandwich, MA 02537	chool, 365 Quaker Meeting 7 Phone:508-888-4900, Fax	
Please send the student's records at checked off above. Please send all real Attendance records, Health records, Trascores, Special Education records (includes Assigned Identification Number (SASID)	ecords pertinent to this anscript information, Stud uding IEP and Assessmer	student, including: ent grades, Standardized test
Name and complete address of s	chool student is trans	sferring from:
School Name:		
Street Address:		
City, State and Zip Code:		
Signature ofparent/guardian		Date
Records request sent on:	Requested by:	