



Consent to Release Educational Records

The following student/s has/have er	rolled in the Snohomish Schoo	ol District:	
Student			Grade:
Last	First Middle		
Student	First Middle	Birthdate:	Grade:
For the purpose of gathering data rele			of records for the
above-named student(s) between the		g, we request the transfer	or records for the
· ·			
Name/Agency/School(Agency or Former School		Phone	
		7in	
Address	City/State	Ζιρ	_
Please mail official school records i	ncluding the following:		
(Special programs include International Baccalaurea	•		
☐ All State Assessment Scores	☐ Standardized Test Inf	ormation \square Immun	ization Records
☐ Attendance Records	☐ Educational Cumulati	ive File 🔲 Withdr	awal Form and Grades
☐ Discipline Records	☐ Special Programs Place	cement 🗆 Report	Cards
☐ Unpaid Fine/Fees*	☐ 504 Plan	☐ Birth Ce	ertificate
☐ Transcript/Academic Record	☐ Current Year/and or Future Year Class Schedule (High School only)		
☐ Washington State History Status	s = □ Met □ Not Met □ 0	Other	
Responding agency/school please a	ddress information regarding	this student to:	
□ Cascade View Elementary – Fax: 360-563- □ Cathcart Elementary – Fax: 360-563-4 □ Dutch Hill Elementary – Fax: 360-563-4 □ Dutch Hill Elementary – Fax: 360-563-63-63-63-63-63-63-63-63-63-63-63-63-6	7078 – PH: 360-563-7075 – 8201 604 – PH: 360-563-4600 – 221 Ur 8-4455 – PH: 360-563-4450 – 823: 7157 – PH: 360-563-7150 – 1103 663-2902 – PH: 360-563-2900 – 74 4828 – PH: 360-563-4825 – 231 1 8-4378 – PH: 360-563-4375 – 732: 60-563-3439 – PH: 360-563-3423 3-4680 – PH: 360-563-4675 – 127 63-4756 – PH: 360-563-4756 – 14 8-563-4585 – PH: 360-563-4528 – 3 9-563-4236 – PH: 360-563-4239 – 2 2 – PH: 360-563-3400 – 525 13 th S 663-7630 – PH: 360-563-7600 – 7 63-4197 – PH: 360-563-4059 – 13	188 th St. SE, Snohomish, Walion Ave., Snohomish, WAlion Ave. SE, Snohomish, Walion Ave. SE, Snohomish, Walion Ave. SE, Snohomish, Walion St., Snohomish, Walion South Machias Rd., Signature Ave. SE, Snohomish, St., Snohomish, Walion South Machias Rd., Signature Ave. SE, Snohomish, WAlion St.,	/A 98296 98290 , WA 98290 A 98290 nish, WA 98296 VA 98290 VA 98290 VA 98290 VA 98208 ohomish, WA 98296 nohomish, WA 98290 Snohomish, WA 98290 Snohomish, WA 98296 mish, WA 98296 A 98290 ry to obtain written consent
to release records. School officials in school sy for such release. I acknowledge notification of this transfer of have a right to receive a copy at my own experiments of the compact of the copy at my own experiments.	records as required by the Family Educa ense, if requested, and have an opportu will be treated in a confidential manne	ational Rights and Privacy Act of nity for a hearing to challenge th	1974 and understand that I
consent, except as allowed by WAC 392-171-63	1.	Data	