



REQUEST FOR SCHOOL RECORDS

To the Parent or Guardian:

Please fill in the information below and submit this request to the Principal/Head's Office at the school where your child is currently enrolled.

Student Name: _____

Current Grade: _____

I authorize the release of copies of all records and information about the above-named student, including current grades, reports for the past three years, standardized test results, psycho-educational evaluations, and any other relevant information. Please send copies of the above information to:

Director of Enrollment
Pine Cobble School
163 Gale Road
Williamstown, MA 01267

Signature of Parent or Guardian

Date

Print name of Parent or Guardian

Thank you for your cooperation.