


Request to Release or Secure Student Records Information and Confirm Enrollment and Attendance*

(from/to outside schools or agencies)

Use this form to request records from a school or agency outside of Poudre School District for a student who intends to enroll, or has enrolled, in a PSD School.

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|---------------------|--|
| Student Info | Student Name: _____ Grade _____ |
| | Date of Birth: _____ Colorado ID# (SASID): _____ SID _____ |

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|---------------------------------------|--|---|--|
| Current PSD School Information | Remit Records VIA: |  | TO: TIMNATH ELEMENTARY |
| | <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> US Mail | | ATT: Registrar 3909 Main Street Timnath, CO 80547 PHONE: 970-488-6825 FAX: 970-488-6827 EMAIL: danielles@psdschools.org |

| | |
|-------------------------------|--|
| Previous School/Agency | School/Institution/Agency _____ |
| | Address _____ |
| | City/State/Zip _____ |
| | Telephone _____ Fax Number _____ Email _____ |

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|--|--|---|---|
| Requested Information | Please send the following records. Thank you. | | |
| | <input type="checkbox"/> All Academic Records | <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Advanced Learning Plan/GT Data |
| | <input type="checkbox"/> Transcript or Report Cards | <input type="checkbox"/> Discipline Records | <input type="checkbox"/> Standardized Test Scores |
| | <input type="checkbox"/> Immunizations | <input type="checkbox"/> Attendance Records | <input type="checkbox"/> Legal/Court Orders |
| <input type="checkbox"/> Response to Intervention Data and/or Read Plan | <input type="checkbox"/> Withdrawal Grades/Courses at time of Withdrawal | <input type="checkbox"/> 504 Plan | |
| <i>IEP/Special Education records are processed through the PSD Records Center only -- psdrecords@psdschools.org</i> | | | |
| <input type="checkbox"/> VERBAL CONTACT ONLY | | | |
| PSD Contact: _____ Phone: _____ | | | |

Parental Consent
(not required for school-to-school requests*)

All information released or secured will be in compliance with the Family Education Rights and Privacy Act (FERPA). No additional information will be released or secured without prior approval from the parent except as provided by law. I hereby authorize the transfer of information as stipulated above.

Parent/Guardian Signature _____ Date

Confirmation of Enrollment and Attendance

(The previous school should keep a copy of this form for verification of transfer.)

| | |
|--------------------------|--|
| <input type="checkbox"/> | The Student listed above enrolled in our school on _____ (date). |
| <input type="checkbox"/> | The Student began attending classes on _____ (date). |
| <input type="checkbox"/> | The Student is pre-registered in our school with a tentative start date of _____ (date). |

Signature of the School/District Representative providing this information:

Signature _____ Title _____ Date

*FERPA (20 U.S.C. § 1232g; 34 CFR 99.31) as revised, states an educational agency or institution may disclose personally identifiable information from an education record of a student without the written consent of the parent of the student or the eligible student if (1) The disclosure is to other school officials, including teachers, within the agency or institution has determined to have legitimate educational interests. (2) The disclosure is to officials of another school or school system in which the student seeks or intends to enroll. Poudre School District Policy JRA/JRC – Student Records/Release of Information on Students 05-24-16 PSD Records 970-490-3146