

Academic Records Release Form

Dear School Guidance Office:

As the parent-educator of student _____ in our home-school program, I am writing to request that an official copy of the academic records be sent to me at the following address:

Sincerely,

Student's Information

Name

Address

Phone Number

My signature below verifies that I am the legal parent/guardian of the student whose name appears above, and I give my permission for the academic school records of my child be sent to the above address.

Parent/Guardian

Date