

SCHOOL DISTRICT OF CLAYTON

STUDENT INFORMATION RELEASE/REQUEST FORM



I hereby authorize the release of any pertinent information pertaining to my child to the School District of Clayton

Name of Student: _____ DOB: _____

Current Grade: _____ Date Last Attended: _____

Name of last school attended: _____

School Address: _____
 Street

 City State Zip

School Phone: _____ School Fax: _____

Parent/Guardian Signature: _____

Relationship to student: _____ Date: _____

Student records include but are not limited to the list below in accordance with state and federal law:

- Academic records including classes taken, grades, grade level completed, schools attended and standardized test scores
- IEP/504 Records
- Health and Medical Records
- Attendance Records
- Discipline Records

If there are no disciplinary records on file for this student, please complete the following:

School Registrar Signature: _____ Date: _____

Please mail all records to school indicated below to the attention of the Registrar:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clayton High 1 Mark Twain Circle Clayton, MO 63105 (314) 854-6600 Fax (314) 854-6626	Wydown Middle 6500 Wydown Clayton, MO 63105 (314) 854-6400 Fax (314) 854-6490	Captain Elementary 6345 Northwood Clayton, MO 63105 (314) 854-6100 Fax (314) 854-6190	Glenridge Elementary 7447 Wellington Way Clayton, MO 63105 (314) 854-6200 Fax (314) 854-6290	Meramec Elementary 400 S. Meramec Clayton, MO 63105 (314) 854-6300 Fax (314) 854-6348

Under the Federal Education Rights and Privacy Act (FERPA) parental consent is not required but will expedite the enrollment process.