

## **RECORDS REQUEST**

ATTENTION: OFFICE OF ACADEMIC RECORDS	
Date:	
TO WHOM IT MAY CONCERN:	
Name:	Entering grade:

is in the process of enrolling in our school. Please forward the following information:

\_\_\_\_\_ Complete school records, including attendance, academic transcripts/report cards, and immunization records. Number of science labs completed (if applicable) and exit grades.

Committee on Special Education materials, which may include CSE determination; the results of educational testing, including psychological, speech testing, etc., and Phase I and/or Phase II Individual Education Plans (IEP or 504).

to: Christian Academy of Western New York 789 Gilmore Avenue North Tonawanda, New York 14120

Attention: Main Office Email: <u>mainoffice@cawny.com</u> Phone: 716-433-1652

Thank you in advance for your cooperation in this matter.

Date:

Parent Signature

Pursuant to Family Educational Rights and Privacy Act, Final Rule on Education Records, Federal Register, June 17, 1976, Vol. 41, No. 118, page 24672, parental permission is no longer required when records are requested by authorized school personnel.