



Request for Educational Student Records and Consent for Disclosure of Student Information

The purpose of this form is to protect the privacy and confidentiality of a student's educational information. Completing and signing this form allows IDEA Public Schools to release requested information to authorized parties to access and use the information for a legitimate educational purpose.

Please provide as much information as possible and submit your request to titleixrecords@ideapublicschools.org.

Requestor

Name: _____

Phone Number: _____ E-mail Address: _____

I certify that I am:

- The Parent/Guardian (for students 17 years or younger); there are no known legal orders preventing me from having access to these records.
- The Eligible Student (18 years or older)
- Other: _____

Student Personal Information

Student's Name While Attending School: _____

Date of Birth: _____ **Student ID # (if known):** _____

Last School Campus Attended: _____

Year of Graduation: _____ **or Last Year of Attendance:** _____ **and Grade Level:** _____

Individual Student Records Requested

- Cumulative (Elementary/Middle) Transcript (High) Medical (Shot) Records Special Education/Section 504
- Discipline Records Report Cards Title IX
- Other (please specify): _____

Limitations (please specify any limitations to requested items below):

Release

*I authorize IDEA Public Schools to release/send the requested information in the following way: *Transcripts will be mailed via U.S. Mail; no transcript will be e-mailed or faxed.*

Pick-Up (list name of individual authorized to pick-up documents): _____

E-mail to the following address: _____

U.S. Mail to:

Company's Name/School's Name/Individual's Name: _____

**Request for Educational Student Records and
Consent for Disclosure of Student Information
(continued)**

Address: _____

City, State, Zip: _____

For the Purpose of: _____

Verification

Eligible Student (print name) Signature (required if student is 18 or older) Date

Parent/Guardian (print name) Signature (required if student is under 18) Date

Copy of photo ID attached: Yes No

All requests MUST include a copy of your Driver's License or other photo identification with signature.