



**STUDENT RECORDS RELEASE FORM**

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School Start Date: \_\_\_\_\_

Name of School Previously Attended: \_\_\_\_\_

Address of Previous School: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

*I hereby give my permission to release the following information from the educational records of the student listed above to the school checked below.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*In accord with revised Federal and State statutes, permission of the parent/guardian is no longer required when authorized school personnel request records.

- |                          |  |                          |                             |
|--------------------------|--|--------------------------|-----------------------------|
| <input type="checkbox"/> | Cumulative Records   | <input type="checkbox"/> | Health/Immunization Records |
| <input type="checkbox"/> | Grades   | <input type="checkbox"/> | Sports Physical             |
| <input type="checkbox"/> | Discipline Record  | <input type="checkbox"/> | Achievement Test Scores     |
| <input type="checkbox"/> | Special Education Records, including: IEPs, most recent assessment summaries and psychological testing. (Please contact the Special Education office with questions at 763.682.8715) |                          |                             |
|                          | Other: _____   |                          |                             |

Please send all records pertaining to the above student to:

- |                          |  |                                     |  |                          |   |
|--------------------------|--|-------------------------------------|--|--------------------------|---|
| <input type="checkbox"/> | Buffalo High School<br>Attn: Registration<br>877 Bison Blvd<br>Buffalo, MN 55313<br>P: 763.682.8100   F: 763.682.8118                | <input type="checkbox"/>            | Phoenix Learning Center<br>Attn: Registration<br>800 8 <sup>th</sup> St NE<br>Buffalo, MN 55313<br>P: 763.682.8680   F: 763.682.8681           | <input type="checkbox"/> | Buffalo Community Middle School<br>Attn: Registration<br>1300 Hwy 25 N<br>Buffalo, MN 55313<br>P: 763.682.8200   F: 763.682.8209                |
| <input type="checkbox"/> | Discovery Elementary<br>Attn: Registration<br>301 2 <sup>nd</sup> Ave SE<br>Buffalo, MN 55313<br>P: 763.682.8400   F: 763.682.8444   | <input type="checkbox"/>            | Hanover Elementary<br>Attn: Registration<br>274 Labeaux Ave NE<br>Hanover, MN 55341<br>P: 763.682.0800   F: 763.682.0868                       | <input type="checkbox"/> | Montrose Elem School of Innovation<br>Attn: Registration<br>100 2 <sup>nd</sup> St S<br>Montrose, MN 55363<br>P: 763.682.8345   F: 763.682.8391 |
| <input type="checkbox"/> | Northwinds Elementary<br>Attn: Registration<br>1111 7 <sup>th</sup> Ave NW<br>Buffalo, MN 55313<br>P: 763.682.8800   F: 763.682.8805 | <input checked="" type="checkbox"/> | <b>Parkside Elementary School</b><br>Attn: Registration<br>207 3 <sup>rd</sup> St NE<br>Buffalo, MN 55313<br>P: 763.682.8500   F: 763.682.8577 | <input type="checkbox"/> | Tatanka Elementary STEM School<br>Attn: Registration<br>703 8 <sup>th</sup> St NE<br>Buffalo, MN 55313<br>P: 763.682.8600   F: 763.682.8671     |

or by email to Susan Bartz at [sbartz@bhmschools.org](mailto:sbartz@bhmschools.org)