

SPRINGFIELD TOWNSHIP ELEMENTARY SCHOOL
ERDENHEIM CAMPUS
RECORD RELEASE FORM

Please send all school records and transcripts, including psychological reports, health records and such other information that would be helpful in planning the educational program for my child.

Student Name _____

Current Grade Level _____

School records should be forwarded to:

Name of

School: _____

Address: _____

City: _____ State: _____ Zip: _____

Reason for transfer of records: _____ Moving from district

_____ Transferring

_____ Other, please explain

Date of transfer: _____

If you are moving, please complete the following:

New Home Address: _____

Parent/Guardian Signature

Date

