

Athens Area School District
Athens, Pennsylvania

ACCESS TO STUDENT RECORDS PERMISSION FORM

The Family Educational Rights and Privacy Act of 1974 (Section 513 of the Education Amendments of 1974, P.L. 93-330) governs access to student records by parents, students, and other individuals. Parents of students under the age of 18 or students 18 years of age or older must consent to the release of information to any person or agency outside the school. The form below is for this purpose.

I hereby authorize the Athens Area School District to release the school records of:

Student's Name (Maiden Name) Date of Birth

to the following individuals and/or institutions:

Please check this box if you need to release IEP or Psychological information in addition to your academic records.

Name

Address

Name

Address

Name

Address

Name

Address

Name

Address

Current Grade Level _____ or Date of Graduation _____

I also acknowledge that I have been informed that I may request a copy of my school records for my personal use.

Date of Request

Signature of Parent/Guardian or
Student if 18 years of age or older

January 2004