

# AMERICAN LEADERSHIP ACADEMY

## Parent Authorization and Request for Release of Records

### \_\_\_ Anthem South K-6

4380 N. Hunt Hwy  
Florence, AZ 85132  
P: (480) 344-9800  
F: (520) 518-5245

### \_\_\_ Gilbert South K-6

1750 E. Riggs Rd  
Gilbert, AZ 85298  
P: (480) 344-9894  
F: (480) 550-5944

### \_\_\_ Queen Creek K-6

19843 E. Chandler Heights Rd  
Queen Creek, AZ 85142  
P: (480) 420-2150  
F: (480) 888-8595

### \_\_\_ Gilbert K-6

3155 S. SanTan Village Pkwy  
Gilbert, AZ 85295  
P: (480) 988-3204  
F: (480) 988-3280

### \_\_\_ Ironwood K-6

650 W. Combs Road  
Queen Creek, AZ 85140  
P: (480) 344-9899  
F: (480) 420-2103

### \_\_\_ San Tan Valley K-6

34696 N. Village Lane  
San Tan Valley, AZ 85142  
P: (480) 420-2100  
F: (480) 729-6003

### \_\_\_ Gilbert North K-6

1010 S Higley Rd  
Gilbert, AZ 85296  
P: (480) 344-9892  
F: (480) 284-5533

### \_\_\_ Mesa Campus K-6

4507 S. Mountain Rd  
Mesa, AZ 85212  
P: (480) 420-2110  
F: (480) 420-2109

### \_\_\_ Signal Butte K-6

22512 S. Signal Butte Rd  
Queen Creek, AZ 85142  
P: (480) 344-9893  
F: (480) 550-5965

I hereby authorize the release of records for the following student:

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Student's Date of Birth

\_\_\_\_\_  
Name of Former School District

\_\_\_\_\_  
Name of Former School

\_\_\_\_\_  
Address of Former School

\_\_\_\_\_  
Phone Number of Former School

I request that the entire set of student records be forwarded including:

- |                                        |                                        |
|----------------------------------------|----------------------------------------|
| A. Official notice of pupil withdrawal | G. Medical Evaluations                 |
| B. Transcripts for all grades          | H. Health information                  |
| C. Attendance records                  | I. Special Education Notices and I.E.P |
| D. Withdrawal grades                   | J. Psychological Records               |
| E. Reports                             | K. Behavior/Discipline                 |
| F. Social history                      |                                        |

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address of Parent or Guardian

\_\_\_\_\_  
Phone Number

*In accordance with the Family Educational Act of 1974 and Arizona State Law, Parent Permission is no longer required when records are requested by authorized school personnel.*