



Student Profile/ Confidential Record Request Form

This is a fillable PDF

Assets High School
913 Alewa Drive
Honolulu, HI 96817
info@assets-school.net
Registrar: 808-440-3601

Please release records for: _____ Date of Birth: _____
Student's Legal Name (Please Print)

Grad Year: _____ Phone: _____ Email: _____

If the requester is not a current student, please provide the following:

Name: _____ Relation to student: _____

Phone: _____ E-mail: _____

Records to Include:

Student Profile Report: This report includes confidential information such as a functional statement about the learner, diagnostic information (when applicable), cognitive and/ or academic testing updates, current relevant accommodations and classroom learning supports.

Send Student Profile Report to:

COMPLETE THE ENTIRE FORM, including name, department, and address of receiving institution.
Please allow at least ten (10) business days to process and deliver

Name of Institution:		
Contact Person, Office, or Department:		
Street Address:		
City:	State:	Zip Code:
Email:	Deadline:	

Preferred Delivery Method:

Mail to address specified above Email Hold for Pickup at the Office

Required Authorization:

Signature of parent or guardian is required if student is under 18

Signature of Student:
Signature of Parent of Legal Guardian:
Name of Parent of Legal Guardian(please print):

Request forms should be delivered to the high school secretary in the office during school hours or emailed directly to the registrar: [info @ assets-school.net](mailto:info@assets-school.net)