

Records Request for Student Attending Amherst Schools

AMHERST EXEMPTED VILLAGE SCHOOLS
185 Forest Street, Amherst, Ohio 44001

Student's Name (Last, First, Middle)	Date of Birth	Grade Entering
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To: _____

Previous School Name	School Phone Number	School Fax Number
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Previous School Address (include city, state and zip code)

I, the undersigned, grant permission for the release of all educational, health, and psychological files (if applicable) for the above mentioned student.

Please include:

- Transcript of grades/grades at withdrawal
- Transcript/ACT/SAT to all colleges & scholarships
- Immunization records and complete physical exam from within the last year (if participating in sports)
- Academic records/cumulative file/test scores/attendance
- Psychological reports (Current IEP, ETR, PARENT CONSENT FORM)
- Custody papers (if applicable)

PLEASE RELEASE AND TRANSFER RECORDS TO: (CIRCLE ONE)

Powers Elementary School

401 Washington Street
Amherst, OH 44001
Phone: (440) 988-8670
Fax: (440) 988-8674
lisa_dadas@amherstk12.org

Nord Middle School

501 Lincoln Street
Amherst, OH 44001
Phone: (440) 988-4441
Fax: (440) 988-2371
nancy_kasten@amherstk12.org

Amherst Board of Education

550 Milan Avenue
Amherst, OH 44001
Phone: (440) 988-4406
Fax: (440) 988-4413
haydiee_burkes@amherstk12.org

Amherst Junior High School

548 Milan Avenue
Amherst, OH 44001
Phone: (440) 988-0324
Fax: (440) 988-0328
sandy_aufdenkampe@amherstk12.org

Marion L. Steele High School

450 Washington Avenue
Amherst, OH 44001
Phone: (440) 988-4433
Fax: (440) 988-5087
susan_jones@amherstk12.org



Parent/Guardian Signature

Date