West Aurora School District 129 Admissions Department 1877 W. Downer Place Aurora, IL 60506

Phone: 630-301-5050 Fax: 630-892-5194

registration@sd129.org

| URGENT: PLEASE FAX: 630-892-5194 | | |
|---|--|--|
| I :ISBE Form | K, 6 th or 9 th Grade Physical | |
| Unofficial Transcript | | |
| Current Grades at time of transfer | | |
| Final Report Card (end of year) | | |
| WAPT and/or ACCESS Scores (if applicable) | | |
| IEP / 504 PLAN (if applicable) | | |

Student Records Release Request

| Date Requested: | 2 nd Request |
|--|--|
| For office use only: | The following agency/organization is permitted to release the information itemized below to West Aurora School District 129: |
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| | |
| Student Name: | Grade: |
| DOB: | |
| Please mail the items checked below to | o: 1877 W. Downer Place, Aurora, Illinois 60506 |
| Attendance records | Case studies (including psychological evaluations) |
| Current grades at time of transfer | Discipline records |
| IEP (Individual Education Plan) | Immunization/Health records |
| ISBE good standing form | Latest report card |
| Medical evaluations/Records | Mental health records |
| Official transcript | Special education files/Multidisciplinary files |
| Standardized test scores | Verified information from non-educational agencies |
| | 504 Plan |
| Verbal/Written communication | |

NOTE: I understand that with written notice, I may revoke this authorization at any time and that I have a right to inspect or request a copy the information to be disclosed. This authorization will automatically expire one year from the signed date. All records should be addressed to: