



RELEASE OF STUDENT RECORDS FORM

To Current School _____
(Name and Address)

Student Name: _____

Date of Birth: _____ Grade _____

Please forward the following records of the student listed above. This is for information purposes only. Do not unenroll the student at this time.

Grades and any grades in progress (if applicable)

Discipline Report

IEP/Psych. Folder

Attendance Report

Parent Signature: _____ Date _____

Please return to: Franklin County Schools OR by email to : teresaeverett@fcschools.net
53 West River Rd
Louisburg, NC 27549