Lakeview School District

2482 Mercer Street
Stoneboro, PA 16153-2799
Phone: 724 376-7911 Fax: 724 376-7910

RELEASE OF STUDENT SCHOOL RECORDS CONSENT

Student's Name _____ Date of Birth _____ Grade _____

I hear by authorize Lakeview School District to obtain my child's information from:

Name of former school: _____

Address: _____

E-Mail Address: _____ **Phone No:** _____

The above student recently entered the Lakeview School District. Below is parent approval for the release of all records including:

_____ 9th Grade Entry Data for PIMS Reporting
_____ PASecure ID Number (if applicable)
_____ Academic/Grade Records/Transcript
_____ Civics Assessment
_____ Discipline Records
_____ Health Records
_____ IEP/Special Education/Psychological Testing
_____ K-12 School to Career Artifacts
_____ Other School Records (co-curricular activities, schedule, attendance – **Please provide student's unexcused absences for this school year.**)
_____ Standardized Test Scores

Please provide any special education records this student might have, including IEP, GIEP or 504 Plans. Thank you.

Please scan the requested records to:
t_vandevander@docs.lakeview.k12.pa.us
or mail to:
Lakeview Middle High School
Mrs. Trista Vandevander, Administrative Assistant
2482 Mercer Street
Stoneboro, PA 16153

Any questions: please call (724) 376-7911 x-6119

_____ _____
Signature of Parent/Guardian Date

_____ _____
Signature of Student (if over 18 years of age) Date