



AVON GROVE CHARTER SCHOOL
110 State Road
West Grove, PA 19390
(484) 667-5000
Fax: (610) 869-5892
www.agcharter.org

Request for Student Records

Student: _____ Date: _____

From: **Avon Grove Charter School, 110 State Road, West Grove, PA 19390**

To: _____
(Please enter current school name)

School Address: _____

The student named above has been admitted to the Avon Grove Charter School.
Please forward the following records as soon as possible:

- Academic Records (report cards, transcripts, discipline records)
 - Health Records
 - Standardized Test Scores and Other
 - Home Language Survey
- **(if applicable) The following Special Education Records should be forwarded under separate cover to “Attention: Special Education Department”:**
- Current Individualized Education Program (IEP) & Invitation to participate
 - Current Notice of Recommended Educational Placement (NOREP)
 - Current Progress Reports
 - Recent Reevaluation or Evaluation Report & permission forms
 - Any waiver forms
 - Original Evaluation Report and Permission to Evaluate (if applicable)

Parent Authorization

I authorize the release of all my child’s records noted above to the Avon Grove Charter School.

Please Print Parent/Guardian names: _____

Parent/Guardian signature: _____ Date: _____

Thank you for your prompt response.
Enrollment Dept. Ext. 271