



Student Record Transmittal Request/Release

Print Form

Office of Instruction
Mat-Su Borough School District
501 N. Gulkana
Palmer, AK 99645

Special Instructions: Complete and submit this form to the appropriate school/department to receive student records. Under Public Law 93-380, amended in section 99.32, PL 93-568, no parent/guardian signature is required for educational records sent to another educational agency

Student Full Name Student ID# DOB

Other Name(s) Used

School Last Attended Grade Withdrawal Date

School City, State

School Official Signature Date Position / Title

Cumulative Student Records:

Please send to:

School

Address

Phone

Fax

Email

Records Requested:

Birth Certificate

Basic State Mandated Cumulative Record

Health / Immunization Records

Grades / Credits

Attendance Records

All Testing Results

Legal Documents

All of the Above

Special Education Records:

Please fax to (907) 761-4078

Student Support Services
Mat-Su Borough School District
501 N. Gulkana
Palmer, AK 99645

Phone (907) 746-9221
Fax (907) 761-4078

Email

Records Requested:

Consent for Initial Placement

Individualized Education Plan (IEP)

Testing, Evaluation, & Assessment Data

Psychological Records & Assessment Data

Behavior Intervention Plan

Child Outcome Summary Entry / Exit

Medical Records

504 Plan(s)

All of the Above

I understand that the student and/or I may, upon written request, receive from the school district a copy of the released records, at my expense. I understand that I have the right to interpretation of records by competent school personnel and that I may review and challenge the contents of such released records.

Parent / Guardian Signature (if necessary) Date Relationship to Student