



Madison Local School District - Request for Release of Student Records

North Elementary School
 1941 Red Bird Road
 Madison, Ohio 44057
 440-428-2151 – Telephone
 440-428-9384 – Fax
 Email: Connie.Kiper@madisonschools.net

South Elementary School
 92 East Main Street
 Madison, Ohio 44057
 440-428-5121 – Telephone
 440-428-8438 – Fax
 Email: Kathy.Gould@madisonschools.net

Madison Middle School
 6079 Middle Ridge Road
 Madison, Ohio 44057
 440-428-1196 – Telephone
 440-417-1857 – Fax
 Email: Peggy.Watts@madisonschools.net

Madison High School
 3100 Burns Road
 Madison, Ohio 44057
 440-428-2161 – Telephone
 440-428-9349 – Fax
 Email: Kim.Keener@madisonschools.net

Madison Pre-K
 1956 Red Bird Road
 Madison, Ohio 44057
 440-428-5111 – Telephone
 440-428-9382 – Fax
 Email: Janice.Haury@madisonschools.net

Madison Board of Education
 1956 Red Bird Road
 Madison, Ohio 44057
 440-428-2166 – Telephone
 440-428-9379 - Fax
 Email: Debbie.Sanford@madisonschools.net

TO: _____
 (Previous School)

 (Address)

 (Telephone Number)

It is requested that an official copy of the records of:

 Student's Name

 Date of Birth Grade

Be released to Madison Local Schools:

 School Name – (address, telephone, and emails to the left)

Please include the following information:

- ____ Academic Grades/Transcripts
- ____ Grades to Withdrawal Date
- ____ Standardized Test Scores (AA/AIR/EOC)
- ____ Attendance Records
- ____ Health / Immunization Records
- ____ Psychological Reports (if applicable)
- ____ Individual Education Plan – IEP (if applicable)
- ____ Multifactorial Evaluation – MFE (if applicable)
- ____ Speech / Hearing / Language Evaluations (if applicable)
- ____ School Profile (explain credits & grading systems)
- ____ ALL OF THE ABOVE
- ____ Other (please specify) _____

 Signature of Parent/Legal Guardian or Student (if legal age)

Has this student been expelled from your school district? No Yes
 If yes, please provide dates and copy of expulsion letter.

 Signature of School Official

 Title Date