



Oak Arbor
SCHOOL

Oak Arbor School

495 Oak Arbor Circle West

Rochester, MI 48306

Phone: (248) 652-3420 Fax: (248) 652-7711

REQUEST FOR STUDENT RECORDS

In accordance with the Family Educational Rights and Privacy Act, Schools may send a student's educational record to officials of other schools or school systems in which the student seeks or intends to enroll, upon condition that the student's parents be notified of the transfer, receive a copy of the record if desired, and have an opportunity to challenge the content of the record.

Information Requested From Former School:

Name of School: _____

Address: _____

City: _____ State: _____ Zip: _____

Cumulative Records to be Released to:

Oak Arbor School
495 Oak Arbor Circle West
Rochester, MI 48306

Phone: (248) 652-3420

Parent / Guardian Approval:

I hereby give permission for the cumulative records of:

_____ /_____/_____
(Student's Name) *(Birthdate)* *(Grade)*

to be released to the school named above.

_____ *(Signature of Parent / Guardian)* _____ *(Relationship to Student)* _____ *(Date)*

_____ *(Signature from Oak Arbor School)* _____ *(Date)*