

SCHOOL BOARD
 Rodney Tyler, Chair
 Joy Harris, Vice Chair
 Martha Harris
 E. Preston Adkins
 Royce Paige



10035 Courthouse Road
 Charles City, Virginia 23030

David W. Gaston, Ed.D.
 Superintendent

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 Phone: (804) 652-4612
 Fax: (804) 829-2363

STUDENT RECORDS REQUEST – RELEASE OF INFORMATION

The student listed below has enrolled in Charles City County Public Schools. Please release the information indicated within the prescribed (5) days from receipt of this request.

Student: _____ Date of Birth: _____

Transcript (Grades and Credits Earned)	Immunization Record (complete)
Standardized Test Scores	Current Physical
SOL Scores (VA schools only)	Custody Papers (if applicable)
STI # (VA schools only)	Copy of Drivers Education
Discipline Records	LEP identification and information
Attendance Data	GATE identification and information
Grades (all report cards)	IEP or 504 (include eligibility information and all components)
Withdrawal Grades	
Diagnotic Scores (Pals, DRA. etc.)	Other:

According to the Code of Virginia 22.1-289:

“Whenever a pupil transfers from one school division to another, the scholastic record or a copy of the scholastic record shall be transferred to the school division to which the pupil transfers upon request from such school division. Permission of the parent, guardian, or other person having control or charge of the student shall not be required for transfer of scholastic record to another school or school division within or outside the commonwealth.”

I hereby authorize _____ School to release the information indicated above.

 Signature of Parent/Guardian

 Date

Please send the information to:

Charles City County Public Schools
Attn: Linda Easter, Student Data Manager/Registrar
10035 Courthouse Road
Charles City, VA 23030
Phone: 804-652-4617
Fax: 804-829-2363

****PLEASE SCAN (if possible) TO EMAIL: leaster@ccps.net**