

Ramsey Public Schools
25 North Franklin Turnpike
Ramsey, New Jersey 07446
201-785-2300



RAMSEY
SCHOOL DISTRICT

*Achieving Excellence
One Student at a Time*

STUDENT RELEASE OF RECORDS FORM

Sent: _____

To: _____ Date: _____
(Name of Previous School or Agency)

(Street) (City) (State) (Zip)

I authorize the release of the following information to:

Phone: 201-785-2345
Fax: 201-818-2656

Ramsey High School
Guidance Department
256 E. Main Street
Ramsey, New Jersey 07446

Any and all confidential information concerning my child as indicated below:

- _____ Official Administrative Records
(Name, Address, Birthdate, Grades through Leave Date, Class Rank, Attendance Record)
- _____ All Standardized Test Scores
- _____ Most Recent Student Schedule
- _____ Official Transcript/Marking Period Grades
- _____ NJ Smart SID #
- _____ Discipline/HIB Reports (with a finding of guilty)
- _____ Extracurricular Activities
- _____ Health Records (including Immunizations)*
- _____ All Child Study Team/Special Services Records
- _____ All Speech/Language Services Records

***PLEASE PROCESS IMMEDIATELY.**

IF HEALTH RECORDS ARE NOT RECEIVED WITHIN 10 SCHOOL DAYS, THE STUDENT WILL BE EXCLUDED FROM SCHOOL.

STUDENT NAME: _____
(Last) (First) (Middle)

CURRENT ADDRESS: _____

PREVIOUS ADDRESS: _____

BIRTHDATE: _____ NJ Smart ID #: _____

(Parent's &/or Legal Guardian Signature)

(Student's Signature if 18 or over)