

# Cambridge Central School District

24 South Park Street

Cambridge, NY 12816

Kristen Eastman - PK-12 Registrar

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## Request for Academic Records

Date: \_\_\_\_\_

Former School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Student(s)	Grade(s)
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Please fax/e-mail a copy of the entire student's educational and health records to the fax number/e-mail address listed above.

Parental permission is no longer required when records are requested by authorized school personnel, (FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT, FINAL RULE ON EDUCATIONAL RECORDS, Federal Register, June 17, 1976, vol. 412, No. 118, page 14673)

Records to be requested are as follows:

Birth Certificate \_\_\_\_\_

Current Class Schedule \_\_\_\_\_

Immunizations \_\_\_\_\_

Transcript \_\_\_\_\_

Current and prior year Report Card \_\_\_\_\_ IEP \_\_\_\_\_ Custody papers (if applicable) \_\_\_\_\_

The Tentative Start date: \_\_\_\_\_