



RECORDS RELEASE FORM FOR WITHDRAWING STUDENT

Student Name _____

Date of Birth _____ Current Grade Level _____

Signature of Parent/Guardian/Student* _____
(*Student must be 18 years old or older)

This signature acknowledges permission to release all pertinent school information including last report card, standardized test scores, psychological tests*, 504's*, ETR's*, IEP's*, credits earned, immunization records and any other health information you may have on file for the above mentioned student.

Date withdrawn from the Twinsburg City School District _____
(last date of attendance)

New School Name _____

New School Address

_____ Street City State Zip Code

New School Phone Number _____ Fax Number _____

New School Email Address _____

****Please Note** Please be sure the new district provides us with a records request. We must continue to track students until the new district requests records.**

Twinsburg City School District IRN: 050070

Twinsburg High School Grades 9-12 10084 Ravenna Road Twinsburg, OH 44087 Phone: 330.486.2400 Fax: 330.405.7406	RB Chamberlin Middle School Grades 7-8 10270 Ravenna Road Twinsburg OH 44087 Phone: 330.486.2281 Fax: 330.963.8313	Dodge Intermediate School Grades 4-6 10225 Ravenna Road Twinsburg OH 44087 Phone: 330.486.2200 Fax: 330.963.8323	Bissell Elementary School Grades 2-3 1811 Glenwood Drive Twinsburg OH 44087 Phone: 330.486.2100 Fax: 330.963.8333	Wilcox Primary School Grades K-1 9198 Darrow Road Twinsburg OH 44087 Phone: 330.486.2030 Fax: 330.963.8332
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