



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: withdrawal form, student profile page information including photo, most recent report card, transcript (Middle/High school), standardized test scores (i.e., End of Course, Ohio State Tests, KRA, etc. based on grade level), gifted information, ELL status (code) if applicable including OELPA scores, attendance information, discipline information, medical/immunization information, birth certificate, adoption documentation, and, if applicable – psychological tests, 504’s, ETR’s, IEP’s, intervention information (RIMP).

Date withdrawn from the Twinsburg City School District _____ (last date of attendance)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 <i>Grades 9-12</i> 10084 Ravenna Road Twinsburg, OH 44087 Phone: 330.486.2400 Fax: 330.405.7406	RB Chamberlin Middle School <i>Grades 7-8</i> 10270 Ravenna Road Twinsburg OH 44087 Phone: 330.486.2281 Fax: 330.963.8313	Dodge Intermediate School <i>Grades 4-6</i> 10225 Ravenna Road Twinsburg OH 44087 Phone: 330.486.2200 Fax: 330.963.8323	Bissell Elementary School <i>Grades 2-3</i> 1811 Glenwood Drive Twinsburg OH 44087 Phone: 330.486.2100 Fax: 330.963.8333	Wilcox Primary School <i>Grades K-1</i> 9198 Darrow Road Twinsburg OH 44087 Phone: 330.486.2030 Fax: 330.963.8332
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