Lulu Walker Elementary School

1750 W. Roller Coaster Road

Tucson, AZ 85704

(520) 696-6518 Fax # (520) 696-6555

Student's Name:_____

Was this student in any of the following special programs at a previous school/district?

Special Education	□Yes	□No
Speech/Language	□Yes	□No
504 Plan	□Yes	□No
Gifted Education	□Yes	□No

If you checked "Yes" to any of the above, please complete the form below so that Walker Elementary may obtain the necessary documentation from the previous district.

Request/Release of Records

Student's Name: _____

Birth Date: _____ School: _____ Grade: _____

REQUEST STUDENT RECORDS FROM:

I hereby authorize the following named school or agency to release all educational, psychological, speech/language, audiological, medical and special education records pertaining to the student named above to the **Amphitheater School District.**

☐ Written communication ☐ Verbal communication

_____

Please Print School or Agency Name Telephone Number

_____

Address

_____

City State Zip

I am aware that this information will be used to assist my child; and that it will be treated with confidentially.

_____ _____

Signature of Parent/Guardian or Surrogate Date