**BEMIDJI AREA SCHOOLS** -- 502 MINNESOTA AVE NW, BEMIDJI MN 56601

Student Registration Ph. 218-333-3100 ext. 31131 or ext. 31134

**RELEASE OF STUDENT RECORD INFORMATION**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bemidji Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MARSS #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Special Education: YES NO Please send Spec Ed Records As Soon As Possible.**

**Is this student in the process of or currently expelled from school: YES NO**

**Grades K – 12 Please send the following:**

**Requesting Records From:**

**Special Education: 504 Plan, Title, IEP, Eval** **Report**

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ K – 8 Academic Records / Test Scores

Attn: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 9 – 12 Credit earned in each subject / Incomplete

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and Failing grades / Achievement Records

City/State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grad Standards: MCA-BST / Prep Standards / High Standards

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Records / Immunizations

Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Certificate

Attendance records

Free & Reduced Meal Application

Disciplinary Information

I give permission for the sending school to release records for the student listed above.

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

(Federal Law 99.31 – No parent signature required for educational records sent to another educational agency.)

**Please Send Records to:**

**Elementary School: Bemidji Middle School Bemidji High School**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ Attn: Hannah Stull Attn: Donna Rust

Attn**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Registrar Registrar

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@isd31.net Hannah\_stull@isd31.net donna\_rust@isd31.net

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Bemidji MN 56601 Bemidji MN 56601 Bemidji MN 56601

Ph. (218)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ph. 218-333-3215 ext 52005 Ph. 218-444-1600 ext. 63326

Fax (218)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax 218-333-3333 Fax 218-444-1630