

## **Annunciation Catholic School**

Mr. Tony Ertel, Principal

Fr. Todd Grogan, Pastor

## Dr. Sandra Chakeres, Director of Faith Formation

## Request for Release or Transfer of School Records

This form is provided for the purpose of releasing a student's records. By signing this

release, a parent, legal guardian, or the student involved who is over 18 years of age, will expedite the transfer of records to another school for enrollment in that school. This includes or allows for verbal or written exchange of ideas, records and observations for the undersigned student. SCHOOL NAME \_\_\_\_\_ DISTRICT \_\_\_\_\_ I, \_\_\_\_\_ (Parent/Guardian/Adult Student) do hereby give my permission for all school records: **Current Grade Student Name** To be released to: Annunciation Catholic School 3545 Clifton Avenue Cincinnati, Ohio 45220 By signing this request for transfer, I relieve the school, which the above named student was attending of the responsibility of notifying me that the records are being transferred. This authorizes transfer of all school records (as defined by PL 93-380 and any amendments thereto.)

Date

Signature of Parent/Guardian/Adult Student