



# MANCHESTER REGIONAL HIGH SCHOOL

70 CHURCH STREET, HALEDON, NJ 07508  
PHONE: (973) 389-2821 FAX: (973) 956-8805



\_\_\_\_\_  
Date

Former School:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PERMISSION TO RELEASE SCHOOL RECORDS

**PLEASE NOTE:** Under the provision of the Privacy Rights of Parents and Students Act, page 1213, Subject D 99 30 (6), it is not necessary to have the written consent of the parents/guardians to release records to "officials of other schools or school system in which the student seeks or intends to enroll."

Director of Guidance:

\_\_\_\_\_, grade \_\_\_\_\_, DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_,  
a former student in your school, has enrolled at Manchester Regional High School.

I authorize Manchester Regional High School to have access to the following information:

1. An official transcript showing numeric grades, units of credit earned in each subject and class rank.
2. Grades in progress at time of leaving during school year.
3. Standardized achievement test scores.
4. District grading system.
5. Disciplinary records.
6. Attendance records.
7. All Child Study Team Records.
8. Custody agreement(s)/other legal document(s).
9. Contact with school counselor/school officials.
10. Immunization records.
11. New Jersey State ID number.
12. Transfer card.

Please forward all school records to:

**MANCHESTER REGIONAL HIGH SCHOOL  
GUIDANCE DEPARTMENT  
70 CHURCH STREET  
HALEDON, NEW JERSEY 07508**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date