

# MIDKOTA PUBLIC SCHOOL

## AUTHORIZATION TO RELEASE SCHOOL RECORDS



Please send records to:

☐ **Elementary School**

Principal: Mrs. Linn Dockter  
203 Curtis Ave W.  
Binford, ND 58416  
Phone: 701.676.2511  
Fax: 701.676.2510

**Junior High/High School**

☐ Principal: Mrs. Kristi Halvorson  
81 School Ave  
Glenfield, ND 58443  
Phone: 701.785.2126  
Fax: 701.785.2226

Upon request please promptly provide access to student records and allow copies to be made. Allow verbal communication between Guardian Ad Litem and Midkota School staff. This includes but not limited to:

- Name
- Birth date
- Birth Certificate
- Grade Level
- Grades
- Attendance Records
- Schools Attended
- Special education records
- ELL Support services
- Standardized test scores
- Health records including immunizations
- Discipline file

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Relationship: \_\_\_\_\_

Previous School: \_\_\_\_\_

School Address: \_\_\_\_\_

School City, State & Zip Code: \_\_\_\_\_

School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_

Date last attended school: \_\_\_\_\_ Today's Date: \_\_\_\_\_

This student is currently suspended or expelled from a school.

Parent/Guardian Signature (not required): \_\_\_\_\_

School Official Signature: \_\_\_\_\_

*Federal Law (Buckley amendment, Section 99.31) states that a written consent is not required for the release of educational records to another educational institution.*

Office use

Date form is Faxed \_\_\_\_\_ Date Form is mailed: \_\_\_\_\_ Date Record Received: \_\_\_\_\_