



Sanborn Regional School District
51 Church Street P.O. Box 429
Kingston, NH 03848

Permission to Release Records

Student's Name:	
Date of Birth:	
Grade:	
Name of Last School Attended:	
School's Address:	
School's Phone number:	
School's Fax Number:	

Records to be Released

- Cumulative Educational Records
- Psychological Records
- Attendance Records
- Health and Immunization records
- Special Education
- Records 504 or Title One
- Behavioral Records

I hereby give my permission for the release of my student's records as specified above to the Sanborn Regional School District (SAU17) Please Send to:

- Daniel J. Bakie Elementary School 179 Main Street Kingston, NH 03848
- Memorial School 31 West Main Street, Newton, NH 03858
- Sanborn Regional Middle School 17 Danville Road, Kingston, NH 03848
- Sanborn regional High School 17 Danville Road, Kingston NH 03848

Signature of Parent / Guardian:	
Date:	
Relationship:	