



Eagle Pride

AVON BOARD OF EDUCATION

36600 Detroit Road Avon, Ohio 44011 Fax: (440) 937-4688

RELEASE OF RECORDS - WITHDRAW

Today's Date _____

The student named below:

Student Name	Grade	Date of Birth	Withdraw Date

Withdrew From:

Avon Local School District, IRN 048116

- Avon Early Learning Center (PreK-KG) 3075 Stoney Ridge Road, 440-934-5124
- Avon East (Gr 1-2) 3100 Nagel Road, 440-937-6015
- Avon Heritage (Gr 3-5) 35575 Detroit Road, 440-937-9660
- Avon Middle School (Gr 6-8) 3445 Long Road, 440-934-3800
- Avon High School (Gr 9-12) ATTN: Student Services, 37545 Detroit Road, 440-934-5115

To Attend:

Next District/School Information:

District Name:			
School Name:			
Address:			City, State, Zip:
School Phone Number:	(area code)	School Fax Number:	(area code)

As Parent/Legal Guardian of the above named student, I authorize the release of the official copy of the school records, including:

- Official Administrative Records/Official School Transcripts
- Grades at withdrawal
- Testing results/score reports (i.e. Standardized Group Achievement and Ability Test Scores, Proficiency Test Results, Third Grade Reading Guarantee, Kindergarten, etc.)(if applicable)
- Individual Psychological Test, Special Education info, including Individualized Education Plan (IEP), Evaluation Team Report (ETR), 504 Plan (if applicable)
- Discipline record
- Health/immunization records
- Other: _____

Are you still a resident of Avon? Yes/No If "Yes", are you enrolling at new school as:

- a student following a parent who is a district employee open enrolled enrolling at private school enrolling at community school

New Mailing Address info (if applicable):

Address:			
City, State, Zip:		Phone Number:	(area code)

Parent/Guardian Signature:		Date:	
School Official/Counselor Signature:		Date:	