



THE NORMAN HOWARD SCHOOL CONFIDENTIAL RECORD RELEASE FORM

Please mail this form to your child's school district AND send a copy to NHS.

To be completed by parent:

I hereby authorize _____ to release to The Norman Howard School
(student's current school)

the records listed below for _____.
(student's name)

- _____ Official grade transcripts and credit information
- _____ Current Report Card
- _____ Standardized Test Data
- _____ Health Records
- _____ Psychological Testing (including cognitive & achievement tests administered with the past two years)
- _____ Educational Evaluations
- _____ Social Work/School Counselor Report (if student receives related services or has in the past)
- _____ Speech & Language Report (if student receives related services or has in the past)
- _____ Outside therapists/counselors reports (if applicable)
- _____ Current IEP
- _____ Attendance Records
- _____ Teacher observation forms

I also authorize The Norman Howard School to inform my child's Special Education Office that the application process has been initiated. I also give the Special Education Office and the faculty and staff at my child's current school my permission to discuss my child with the Admissions Committee should they require further information.

Parent's Signature

Date

TO THE SCHOOL:

PLEASE MAIL ALL RECORDS TO:
The Norman Howard School, Admissions Office
275 Pinnacle Rd.
Rochester, NY 14623