Special Education
Release of Records

Serving Farmington, Farmington Hills, and West Bloomfield

Date of Request: _____

The purpose of this request is: *(please check one box)*

Complete name and address:

☐ **For Farmington Public School District to <u>release</u> records or information to:** → Name: _____
Address: _____

– **OR** –

☐ **For Farmington Public School District to <u>receive</u> records or information from:**

Student Name: _____ **Date of Birth:** _____

Specifically:

_____ **Educational Report**
_____ **Medical Information**
_____ **Occupational Therapy Reports**
_____ **Physical Therapy Reports**
_____ **Psychological Evaluation**
_____ **Social History**
_____ **Speech Evaluation**
_____ **IEPT/MET**
_____ **OTHER:** _____

I hereby authorize you and/or your department to release information as indicated above concerning the named individual. Information received will be used solely for educational planning and will not be transferred to a third party without written permission from parents or legal guardian, licensed physician, registered nurse, social worker, school social agency, or other helping professionally qualified personnel whose training and/or information would be useful. The parental release of information and/or sending of school information is in compliance with Federal Public Law 93-380

Please send requested information to:

Farmington Public School District
Special Education Department
Department Attention:
Bridget Bollini / Records
32789 W. 10 Mile Road Farmington, MI 48336-2360

If the Information requested is less than 25 pages, please fax to: 248-489-3413
Attention: Bridget Bollini / Records

The parental release of information and/or sending of school information is in compliance with Federal Public Law 93-380. Parents, Legal Guardians, or students of legal age may request a review and/or copy of the school records transferred. If this is desired, the school office should be notified. If you request a copy of the school records being transferred; the school is relieved of the responsibilities for confidentiality of those records.

Farmington Public Schools
Special Education Services
32789 W. 10 Mile Rd., Farmington
MI 48336-2306

Sent: ☐**Yes** ☐**NO**

By: _____
Staff

Phone: 248-489-3394
Fax: 248-489-3413
www.farmington.k12.mi.us