



Bullis Charter School
102 West Portola Avenue
Los Altos, CA 94022
(650) 947-4939 tel
(650) 947-4989 fax

REQUEST FOR STUDENT RECORDS— RELEASE OF INFORMATION

To the Parent or Guardian:

Please remember to sign the attached form and include it along with your completed Registration Packet by January 25, 2008.

Please know that your child's records will NOT be requested unless your child is offered a spot at Bullis Charter School AND you accept that spot by completing an Enrollment Confirmation form. Records are requested shortly before the end of the school year.

Incomplete or late Registration Packets will not be eligible for consideration for this Open Enrollment Period.

Thank you.



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To the Parent or Guardian: Please complete and sign the statement below:

Applicant Name:

_____ (Last)

_____ (First)

_____ (Middle)

Current School: _____ Current Grade: _____

I authorize _____ (current school) to release school records on file for the above student to Bullis Charter School.

Parent/Guardian: _____ Relationship: _____
(Print Name)

Parent/Guardian Signature: _____ Date: _____

To the School: The student list above is registering to Bullis Charter School. To aid our enrollment process, please send the following information for the student:

- All Report Card/Progress Reports
- Results of all standardized tests and evaluations
- Results of all Cognitive Abilities tests and evaluations
- Results of all criterion-referenced tests and evaluations
- Current Health Card
- All Student Study Team (SST) evaluations and recommendations
- All Special Education Records including evaluations and Individual Education Program (IEP)

Please send this information (including this form) to: **Bullis Charter School**
102 West Portola Avenue
Los Altos, CA 94022-1210