



HURON HIGH SCHOOL
OFFICE OF STUDENT RECORDS
2727 Fuller Road
Ann Arbor, Michigan 48105

REQUEST FOR CUMULATIVE - PERMANENT SCHOOL RECORDS

Date of Request _____

Name of Former School _____

Street Address _____ Zip _____

City, State _____ Country _____

Student Name

Grade

Date of Birth

The above named student has enrolled in Huron High School. We request that the student's Cumulative-Permanent School Record be forwarded to us as soon as possible. Please include an OFFICIAL transcript, health records, psychological, withdrawal, and any other available grades/reports that would assist in placing and evaluating this student. Your prompt attention to this request will be greatly appreciated.

I hereby authorize the release of all pertinent records and information to Huron High School.

Signature of Parent or Guardian

Date

Second Request

Third Request

No person shall be excluded from participation in, be denied the benefits of, or be subjected to discrimination in any educational program or activity available in any school on the basis of race, color, sex, religion, creed, political belief, age, national origin, linguistic and language differences, sexual orientation, socio-economic status, height, weight, marital or familial status, or disability. Policy #5145.9, Adopted: 7/29/81; Revised: 9/9/98.