KINGSLEY-PIERSON COMMUNITY SCHOOL
322 Quest Avenue, P.O. Box 520
Kingsley, Iowa 51028-0520

AUTHORIZATION TO RELEASE STUDENT RECORDS

Name of Student: ____________________________ Grade: ______________

You are hereby authorized to release to:

(Name of School/College)

________________________________________

________________________________________

________________________________________

________________________________________

The following records of the above named student:

_____ Transcript of Grades

_____ Health Records

_____ Other: ____________________________

The purpose of this disclosure is:

_____ Student Transfer or Placement

_____ Other: ____________________________

(Date) ____________________________

(Signature of Parent/Legal Guardian) ____________________________

For Office Use:

Transcript sent to:

________________________________________

Date: ____________________________

________________________________________

Date: ____________________________

Scott B. Bailey
Superintendent/9-12 Principal
Kingsley Phone: (712) 378-2861
Kingsley Fax: (712) 378-3729

Rob Wiese
K-8 Principal
Pierson Phone: (712) 375-5939
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