

MONTGOMERY PREPARATORY ACADEMY

550 5TH AVE East Wing
MONTGOMERY, WEST VIRGINIA 25136

Phone 304-407-2614 Web Page <http://www.mlmpipa.org/montgomerypa/>

Permission for Release of Records and/or Information Form Records

Student's Name: _____ DOB: _____

____ Withdrawal Form

____ Official Transcripts

____ Most Recent Report Cards

____ Discipline Records

____ Attendance Forms

____ Behavioral / Psychological Reports

____ Other (Specify) **ALL COPIES OF THE STUDENT'S PHYSICAL RECORDS THAT PERTAIN TO**

HIS CURRENT ENROLLMENT AND ACADEMIC PERFORMANCE

The record(s) indicated below is/are to be released to:

Agency: [Montgomery Preparatory Academy](#)

Contact Person: [Dr. Misty McCune](#)

Address:

The purpose of this release is: [To enroll the student into a private educational facility.](#)

I hereby grant permission for the release of the above record (s).

Name of Parent or Guardian

Signature of Parent or Guardian

[MONTGOMERY PREPARATORY ACADEMY](#)

School/Agency Releasing/Requesting Records

Signature of Authorized Personnel

Public Schools are subject to the Family Educational Rights and Privacy Act of 1974, Codified at 20 U -S.C. 1232g. Therefore, all documents contained in a student's educational records, except those expressly waived, are accessible to the parents or eligible students.

Personally, identifiable information may be transferred to a third party only on the condition that it not be released to any other parties without obtaining the consent of the parent or eligible student.