



ST. JOHN THE BAPTIST SCHOOL
508 PARK AVENUE
HARRISON, OHIO 45030

(513) 367-6826

ARCHDIOCESE OF CINCINNATI

REQUEST FOR RELEASE OR TRANSFER OF SCHOOL RECORDS

This form is provided for the purpose of obtaining or releasing a student's records. By signing this release, a parent or legal guardian will expedite the transfer of records (educational, medical, psychological evaluation) to another school for enrollment in that school.

Name of student(s)	Date of Birth	Grade
--------------------	---------------	-------

Name of school student is leaving

Address

Release records to: St. John the Baptist School
508 Park Avenue
Harrison, Ohio 45030

By signing this request for transfer, I relieve the school which the above named student was attending of the responsibility of notifying me that the records are being transferred. This authorizes transfer of all school records (as defined by PL 93-380 and any amendments thereto).

Parent or Guardian

Principal