

# SIERRA-PLUMAS JOINT UNIFIED SCHOOL DISTRICT

## PARENT AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS

In accordance with the Family Education Rights and Privacy Act of 1974 and California State Law, I hereby authorize the release to the school named below of all records including grades and health records, as well as psychological, social, educational, developmental information, regarding the following pupil\pupils:

NAME	BIRTHDATE	GRADE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

### PREVIOUS SCHOOL NAME AND ADDRESS (Must be completed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

### PLEASE SEND CUM RECORDS TO:

Dr. Jeff Bauer, Supt./Principal  
Sierra Crest School  
(Independent Study Program)  
P. O. Drawer E  
Downieville, CA 95936

### PLEASE SEND PSYCHOLOGICAL RECORDS TO:

SELPA Director  
Sierra County Office of Education  
P. O. Box 959  
Loyalton, CA 96118

NOTE: Student No. \_\_\_ has been expelled from \_\_\_\_\_ to \_\_\_\_\_ .  
Date Date

(Please attach a sheet detailing the violation, disciplinary action taken, and evidence indicating whether or not this student poses a potential threat to students or employees.)