



## Request for Release of Student's Records *Solicitud de liberación de expedientes del alumno.*

Padre(s): Por favor completar y enviar esta solicitud a la escuela actual de su hijo  
Parent(s): Please complete and forward this request form to the student's current school.

\_\_\_\_\_  
Apellido del alumno  
*Student's Last Name*

\_\_\_\_\_  
Primer Nombre  
*First Name*

\_\_\_\_\_  
Grado Actual  
*Current Grade*

\_\_\_\_\_  
Fecha de nacimiento  
*Birthdate*

I hereby authorize \_\_\_\_\_ to release all school records, including records in  
School / Escuela

the confidential and disciplines files, pertaining to the above-name student. Please, include copies of the official transcripts, evaluations, IEP's and/or SEP's test data, and health information including the Commonwealth of Virginia School Health

Entrance Form. Information should be sent to:

Melanie Rodríguez  
LEAP Program Director  
11600 Gayton Road  
Richmond, VA 23238

The forms may be faxed to **(804)740-3394**

The forms may be emailed to [melanie.rodriguez@stewardschool.org](mailto:melanie.rodriguez@stewardschool.org)

\_\_\_\_\_  
Nombre del representante (Letre de molde) Parent's Name (Print)

\_\_\_\_\_  
Firma del padre/guardian Parent's Signature

\_\_\_\_\_  
Fecha Date