

Rockaway Borough Schools

103 East Main Street
Rockaway, NJ 07866

Mrs. Phyllis Alpaugh, Superintendent
Tel: 973-625-8601
Fax: 973-625-7355

Date: _____

PERMISSION FOR RELEASE OF INFORMATION OF STUDENT RECORDS

I, _____, hereby authorize
(Name of Parent/Guardian)

(Previous School)

(Street Address or P.O. Box)

(City, State and Zip Code)

to release all records regarding my child _____ who has enrolled in:
(Student's Name)

THOMAS JEFFERSON SCHOOL
95 East Main Street
Rockaway, NJ 07866

Which may include:

- Academic and Testing Records
- Health and Immunization Records
- Child Study Team Records

Student Disciplinary Records as required by the NCLB Act of 2001, Section 4155

To be sent to:

Mr. David Waxman, Principal
Thomas Jefferson School
95 East Main Street
Rockaway, NJ 07866

Authorized Signature

Relationship

Address

Telephone