



16300 - 112th Avenue NE, Bothell, WA 98011
(425) 488-9778; FAX (425) 483-5765

REQUEST FOR EXCHANGE OF CONFIDENTIAL HEALTH/PSYCHOLOGICAL/EDUCATIONAL INFORMATION

RE: _____
(Student's Name)

Birth Date: _____

Campus: _____

Grade: _____ Date: _____

I hereby authorize the exchange of confidential information regarding the above named student for the purpose of establishing educational eligibility, placement, and program planning between:

Cedar Park Christian Schools

And

Name of School District / Agency / Physician / Psychologist / Etc.

Street Address, City, State, Zip

Phone

FAX Number

Information Requested (Check all that apply.)

- | | |
|---|---|
| <input type="checkbox"/> Official Transcript | <input type="checkbox"/> Discipline Records |
| <input type="checkbox"/> Academic Records | <input type="checkbox"/> Health Records |
| <input type="checkbox"/> Educational Evaluations/Test Scores | <input type="checkbox"/> Immunization Records |
| <input type="checkbox"/> Special Education Records | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Psychological and Counseling Records | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Social/Emotional | <input type="checkbox"/> Other (specify): _____ |

I acknowledge notification of this transfer of records as required by the Family Educational Right and Privacy Act of 1974 and understand that I have a right to receive a copy at my own expense if requested and have an opportunity for a hearing to challenge the content of the records. I understand that the information obtained will be treated in a confidential manner and will not be transmitted to a third party without my permission. I also understand that it is my right to request a copy of all information and contest any information I feel is incorrect. This authorization is valid until revoked in writing.

Signature of Parent, Guardian, or Adult Student

Date

PLEASE RETURN TO:
Cedar Park Christian Schools
Attn: Registrar
16300 - 112th Avenue NE
Bothell, WA 98011

Relationship to Student

Street Address, City, State, Zip