FONDA-FULTONVILLE CENTRAL SCHOOL DISTRICT
Central Registration
112 Old Johnstown Rd
PO Box 1501
Fonda, NY 12068-1501

REQUEST FOR RELEASE OF STUDENT RECORDS

Student Name:_____

Date of Birth:_____ **Grade**:_____

_____
Previous School

_____
Previous school Mailing Address

_____
City, State, Zip

Previous School Phone:_____

Previous School Fax:_____

I hereby request and direct the above school to release and/or exchange all information pertaining to the above student to the following (√) school:

***Please include:* Birth Certificate, Health/Immunization Records, and Academic Records including Standardized Testing, Science State Lab Investigations, Last Report Card and Withdrawal Grades.**

***If applicable, please also include:* Official Transcript, IEP, 504 Plan, Confidential/Psychological/Special Education Records, Custody or Guardianship Papers.**

Please fax all Special Education records to Lisa Rose @ (518) 853-8643

□ Files are being requested for enrollment consideration. Student(s) should remain enrolled in current placement. If accepted, we will notify once registration is complete.

□Fonda-Fultonville Elementary School (Pre-K – Grade 4)
112 Old Johnstown Rd
PO Box 1501
Fonda, NY 12068
Ph: (518) 853-3332 Fax: (518) 853-1455
Attn: Sully Cruz, Elementary Secretary

□Fonda-Fultonville Middle School (Grades 5-8)
112 Old Johnstown Rd
PO Box 1501
Fonda, NY 12068
Ph: (518) 853-4747 Fax: (518) 853-4498
Attn: Kathleen Sullivan, MS Guidance

□Fonda-Fultonville High School (Grades 9-12)
112 Old Johnstown Rd
PO Box 1501
Fonda, NY 12068
Ph: (518) 853-4111 Email: efonda@ffcsd.org
Attn: Elizabeth Fonda, HS Guidance Secretary

X
Signature of Parent, Guardian or Eligible Student Date