

## Needham Public Schools

1330 Highland Avenue, Needham MA 02492

Tel. 781-455-0400 \* Fax 781-455-0417

[www.needham.k12.ma.us](http://www.needham.k12.ma.us)

Daniel Gutekanst, Ed.D.  
Superintendent of Schools

Mary Lammi  
Assistant Superintendent  
for Student Support Services

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### Authorization to Release Student Records

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Former Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

I authorize \_\_\_\_\_ School/District, to release the following special education records to Needham Public Schools.

#### Evaluation Reports

#### Individualized Education Program documents (IEPs)

#### Progress Reports

#### Other special education records

\_\_\_\_\_ I also authorize Needham Public Schools special education staff to speak with staff from my student's previous school. (Check off for authorization)

**Please send/or fax the student's records at your earliest convenience to:**

**Tamara Barron - Special Education Program Assistant  
Needham Public Schools  
1330 Highland Ave.  
Needham, MA 02494  
FAX # 781-455-0417**

**Name of contact person or school district student is attending/transferring from:**

**Contact Person:** \_\_\_\_\_

**School/District Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State and Zip Code:** \_\_\_\_\_

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date

Records request mailed on: \_\_\_\_\_ Requested by: \_\_\_\_\_