



## Portland Public School District 1J Authorization to Release Records

**Attention:**

School/Agency \_\_\_\_\_ Date of Request \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

**Send Records to:**

School or BESC \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Fax \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

**Student Information:**

Name (Last, First) \_\_\_\_\_

DOB \_\_\_\_\_

\*Please send the following information: Student Cumulative File, Proof of Immunization, Test Scores, Attendance, Special Education Records (IEP), Talented and Gifted Records, and ESL Records.

\*As defined by Oregon Law:

1. Education records are those records that are directly related to a student and maintained by another educational agency or institution.
2. Release means to permit access to , transfer or other communication of educational records or personally identifiable information contained in those records, by any means, oral, written, or electronic.
3. ORS 326.575(2) states that student records shall be sent no later than ten (10) working days after receipt of this request.