



ROSLYN PUBLIC SCHOOLS

375 Locust Lane, Roslyn Heights, NY 11577 516-801-5060 Fax 516-801-5068 www.roslynschools.org

OFFICE OF PUPIL PERSONNEL SERVICES & SPECIAL EDUCATION

Barbara Schwartz
Director

Marnie Cohen, Assistant Director
Cindy Samide, Assistant Director

DATE: _____

STUDENT NAME: _____ DATE OF BIRTH: _____

LAST SCHOOL ATTENDED

GRADE

Please send **ACADEMIC, HEALTH, SPECIAL EDUCATION (if applicable), and attendance records, as well as psychological reports (if applicable)** concerning the above-named student. Authorization for release of all information is appended below. Please send us a description of your grading system as well as an English translation where necessary. Please forward to the school checked below:

____ Mrs. Jessica Kemler, Principal Harbor Hill School 3 Glen Cove Road Greenvale, NY 11548 Fax: (516) 801-5408	____ Mrs. Melissa Krieger, Principal East Hills School 400 Round Hill Road Roslyn Heights, NY 11577 Fax: (516) 801-5308	____ Ms. Mary Wood, Principal Heights School 240 Willow Street Roslyn Heights, NY 11577 Fax: (516) 801-5508
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____ Mr. Craig Johanson, Principal Roslyn Middle School/Guidance 375 Locust Lane Roslyn Heights, NY 11577 Fax: (516) 801-5208	____ Mr. Gregg Wasserman Guidance Director Roslyn High School 475 Round Hill Road Roslyn Heights, NY 11577 Fax: (516) 801-5138	____ Mrs. Barbara Schwartz Director, Pupil Personnel Services & Special Education 375 Locust Lane Roslyn Heights, NY 11577 Fax: (516) 801-5068
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Your prompt response is greatly appreciated.

Barbara Schwartz

AUTHORIZATION FOR TRANSFER OF STUDENT RECORDS

I hereby give my permission to Roslyn Public Schools to obtain any and all the records indicated above for the following:

PLEASE PRINT STUDENTS FULL NAME

SIGNATURE OF PARENT/GUARDIAN

DATE