



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

AUTHORIZATION FOR TRANSFER OF STUDENT RECORDS

DATE: _____

STUDENT NAME: _____ DATE OF BIRTH: _____

LAST SCHOOL ATTENDED

GRADE ATTENDED AT LAST SCHOOL

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:

____ Michelle Hazen, Principal
Harbor Hill School
3 Glen Cove Road
Greenvale, NY 11548
Fax: (516) 801-5408

____ Mrs. Sherry Ma, Principal
East Hills School
400 Round Hill Road
Roslyn Heights, NY 11577
Fax: (516) 801-5308

____ Mrs. Mary Wood, Principal
Heights School
240 Willow Street
Roslyn Heights, NY 11577
Fax: (516) 801-5508

____ Mr. Craig Johanson, Principal
Roslyn Middle School/Guidance
375 Locust Lane
Roslyn Heights, NY 11577
Fax: (516) 801-5208

____ Mrs. Tanya Baptiste
Director, Guidance & Counseling (K-12)
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 1577
Fax: (516) 801-5068

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 STUDENT'S FULL NAME

SIGNATURE OF PARENT/GUARDIAN

DATE