Wamego Public Schools

1008 8th St. Wamego, KS 66547 www.usd320.com

Ph: 785 • 456 • 7643 Fax: 785 • 456 • 8125

AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS

Previous School Name:									
Address (Street, City, State, Zip): Phone: Fax: To Whom It May Concern:									
					The officials of the Unified S proper placement of my child district where my child(ren) is	l(ren). I understand that	this permission slip may be		
					☐ All educational r	ecords			
☐ Kansas Student S	State ID #								
☐ Testing & evalua	ation done for possible p	lacement in Special Educat	ion Programs						
Attendance									
Psychiatric, Psyc	Psychiatric, Psychological and Social Work Reports								
Ongoing treatment information related to educational adjustment									
☐ Guidance and co	Guidance and counseling records								
Health records (i	mmunizations & physic	als)							
Copy of Birth Ce	ertificate								
Student's Name		Grade	Birth Date						
Student's Name		Grade	Birth Date						
Student's Name		Grade	Birth Date						
THIS WILL A	UTHORIZE YOU TO R	ELEASE INFORMATION A	AS DESIGNATED ABOVE TO	0:					
Central Elementary Attn: Records Clerk 900 7 th St. Wamego, KS 66547 Phone: 785-456-7271 Fax: 785- 456-7172 <i>Grades: PreK-2</i>	West Elementary Attn: Records Clerk 1911 Sixth Street Wamego, KS 66547 Phone: 785-456-8333 Fax: 785- 456-7267 <i>Grades: 3-5</i>	Wamego Middle School Attn: Records Clerk 1701 Kaw Valley Road Wamego, KS 66547 Phone: 785-456-7682 Fax: 785-456-2944 <i>Grades: 6-8</i>	Wamego High School Attn: Records Clerk 801 Lincoln Wamego, KS 66547 Phone: 785-456-2214 Fax: 785-456-7382 <i>Grades: 9-12</i>						
Parent/Guardian Signature									