

**FOREST RANCH CHARTER SCHOOL**  
PO Box 5  
15815 Cedar Creek Road  
Forest Ranch, CA 95942

**Request for Student Records K – 8 Grades**

To:

\_\_\_\_\_  
Name of school/department

\_\_\_\_\_  
District

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City/state/zip

Please forward all cumulative, health, and special education/confidential student files and records for the student referenced below to:

Office Manager  
Forest Ranch Charter School  
PO Box 5  
15815 Cedar Creek Road  
Forest Ranch, CA 95942

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
Grade

Authorization: I authorize the release of the above named student's records as provided under the Family Educational Rights and Privacy Act of 1980. I understand that I may obtain a copy of my child's school records (known as "personally identifiable records"). A photo static or FAX copy of my signature is as valid as the original.

\_\_\_\_\_  
Signature of parent/legal guardian                      relationship                      date

\_\_\_\_\_  
Address Street/City/State/Zip

\_\_\_\_\_  
Area Code/Phone Number

\_\_\_\_\_  
Date Requested