EXETER-WEST GREENWICH REGIONAL SCHOOL DISTRICT

940 Nooseneck Hill Road West Greenwich, RI 02817

RECORDS RELEASE FORM

STUDENT NAME:	DOB:	GRADE:
SCHOOL NAME:		
STREET ADDRESS:		_
CITY:	STATE:	ZIP:
ATTENTION:		
PHONE:		
Dear Sir or Madam:	***************************************	
The above mentioned student has registered i	in the EWG Regional School distric	ct. We are requesting:
Academic Records Standardized Test Scores All Psychological Evaluations Special Service Records	Attendance Ro	ecords ds
be forwarded to the address indicated below. request.	Thank you in advance for your im	mediate attention to this
	Sincerely,	
	James H. Erina Superintendent	• •
In order to receive the necessary records from form be signed. This form signed by the parei Exeter-West Greenwich Regional School Districtions school records including any Special Services	nt or legal guardian of the above na rict the necessary permission to rec	amed student will grant the
I hereby request that you release the records to Regional School District.	for the above named student to the	Exeter-West Greenwich
Signature:		Date:
(Parent/Legal Guardia	ın)	
Records to be released to: Attn: School S	Secretary	
 Lineham School, 859 Nooseneck Hill Reway Wawaloam School, 100 Victory Highway Metcalf School, 30 Nooseneck Hill Road EWG Junior High School, 930 Noosene EWG Senior High School, 930 Noosene 	ly, Exeter, RI 02822 (Phone: 29 d, Exeter, RI 02822 (Phone: 39 eck Hill Road, West Greenwich,	95-8808) 97-3375) RI 02817 (397-6898 X208)