



Denville Township Schools

1 St. Mary's Place, 2nd Floor, Denville, New Jersey 07834

Phone: 973-983-6530

Fax: 973-784-4778

Re: _____

Date of Birth: _____

Grade: _____

School: _____

Please fill in previous school name and address.

School Name: _____

Address: _____

Dear Principal,

The student named above was enrolled on _____. You can be of assistance by forwarding, at your earliest convenience, data related to the student's achievement, standardized test results, class placement, health records and any Child Study Team reports.

This student's parent and/or guardian has signed a release form which permits your school district to forward the data requested.

Thank you for your prompt consideration and cooperation.

Sincerely,

Principal

Authorization for Release of Records

Date: _____

In accordance with the "Family Educational Rights and Privacy Act of 1974" (P.L. 93-380), I hereby authorize the release of all scholastic, medical and child study team records for _____.

Signature of Parent or Legal Guardian

Print Parent or Legal Guardian Name

Please send records to the following school:

_____ **Valleyview Middle School**
320 Diamond Spring Road
Denville, NJ 07834
Fax: 973-627-0632

_____ **Riverview Elementary School**
33 St. Mary's Place
Denville, NJ 07834
Fax: 973-627-3681

_____ **Lakeview Elementary School**
44 Cooper Road
Denville, NJ 07834
Fax: 973-366-4345