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[www.collegiumcharter.com](http://www.collegiumcharter.com)

**Release of School Records Request Form**  
**Usages: Transferring Students, Document Requests, and Informational Requests**

**Please check appropriate box(es):**

- Student transfer. Records to be sent to new school. There is no fee for student records to be sent to a school when a student is transferring.  
Last Date Attending CCS \_\_\_\_\_

*Collegium will process transfer document requests in the order in which they are received and will work to do so as quickly as possible. However, processing of this request may take up to 10 school days. Please submit the form with appropriate advance notice. When transferring out of Collegium, the student/family is responsible for the return of school textbooks, equipment, and materials.*

- Document request. There is a \$0.25 per page fee. This fee must be paid prior to materials being mailed or picked-up by the parent/guardian.  
Please provide an estimate of copying costs before processing: No Yes  
*(please circle)*
- Information request. This allows CCS employees to communicate with and share information about this student with a school, agency, or person.

*Collegium will process document and information requests in the order in which they are received and will work to do so as quickly as possible. However, processing of this request may take up to 45 school days. Please submit the form with appropriate advance notice. No documents will be provided to a family until obligations are fulfilled.*

I, \_\_\_\_\_, *(print parent/guardian's name)* authorize Collegium Charter School to:

*Please check appropriate box.*

- Process the student transfer or document request indicated above.  
Release the school records for my child. Please send a copy of his/her Academic, Health, Discipline, and Special Education Records.

Or

- Communicate with and share information about the student listed below with the school, agency, or person listed below.

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

to \_\_\_\_\_  
(Name of School, Agency or Person)

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Parent/Guardian)