

Altamont Lutheran Interparish school



7 South Edwards
Altamont, Illinois 62411
Phone: 618-483-6428
Fax: 618-483-6296
www.altamontlis.com

Office Hours: 8 a.m. – 3:30 p.m.
Gail Traub, Principal alisadmin@altamontlis.com

STUDENT RECORD RELEASE FORM

Date: _____

I authorize _____ to release all
Name of School

pertinent information (medical, psychological, social services and

educational) in the school records of _____ to
Name of student

Name of Person Requesting Information

Title

at _____
School

Address

With this permission I also release Altamont Lutheran Interparish School from all liability and all claims pertaining to the disclosure of this information.

The above permission is granted by _____.

Signed _____
Signature of parent or guardian

Address _____

These are confidential records and are not to be shown to any other third party without the Parents/Students permission.