

# Eagle Creek Academy

*We are the future.*

3739 Kern Rd., Oakland, MI 48363  
www.eaglecreekacademy.com  
Phone: (248) 475-9999  
Fax: (248) 475-1616

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## Authorization to Release Student Records

Dear Parent,

Please complete this form and return it to Eagle Creek. If your child has been enrolled in more than one school over the last two years, please fill out a separate form for each school.

Student Name: \_\_\_\_\_

Previous School's Name: \_\_\_\_\_

Previous School's Address: \_\_\_\_\_

Previous School's Phone: \_\_\_\_\_ Previous School's Fax: \_\_\_\_\_

I authorize my child's school and teachers to release the below information (and any other information about my child) which would identify apparent learning and behavior patterns.

Parent Signature \_\_\_\_\_

Print Parent's Name \_\_\_\_\_

Date Signed \_\_\_\_\_

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*Dear principal or counselor,*

*Please forward the CA-60 and copies of the following items to Eagle Creek Academy at the above address at your earliest convenience. Thank you.*

- *Report cards with comments and grades*
- *Standardized and aptitude test results*
- *Attendance record*
- *Discipline records*
- *IEP records*
- *Psychological reports*
- *Other personal evaluations*