



## Release of Information

NAME AND ADDRESS OF THE LAST SCHOOL  
THE STUDENT WAS ENROLLED IN:

DATE: \_\_\_\_\_

Previous School \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Fax \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ CURRENT GRADE: \_\_\_\_\_

Please provide the students grade

Please fax the following requested information to 248-544-5443 at your earliest convenience:

- Discipline Records
- Attendance
- Most Recent IEP (if applicable)
- Transcript (Grades 9-12)
- Most Recent Report Card (Grades 1-8)

Signature \_\_\_\_\_

Relationship: \_\_\_\_\_ Date: \_\_\_\_\_

### **SCHOOL OFFICE USE ONLY**

Please mail CA-60 complete with health records, transcripts, and any other academic information you might have to:

\_\_\_\_\_ Hazel Park High School  
*PH: (248) 658-5100 FAX: (248) 544-5389*  
 23400 Hughes, Hazel Park, MI 48030

\_\_\_\_\_ United Oaks Elementary School  
*PH: (248) 658-2400 FAX (248) 542-3530*  
 1001 E. Harry, Hazel Park, MI 48030

\_\_\_\_\_ Hazel Park Junior High  
*PH: (248) 658-2300 FAX (248) 586-5875*  
 22770 Highland, Hazel Park, MI 48030

\_\_\_\_\_ Webb Elementary School  
*PH: (248) 658-5900 FAX (248) 586-5848*  
 2100 Woodward Hts., Ferndale 48220

\_\_\_\_\_ Hoover Elementary School  
*PH: (248) 658-5300 FAX (248) 658-1131*  
 23720 Hoover. Hazel Park. MI 48030

\_\_\_\_\_ Ford Administration Building  
*PH: (248) 658-5200 FAX (248) 542-5443*  
 1620 E. Elza, Hazel Park, MI 48030

Please send ALL SPECIAL EDUCATION INFORMATION  
(Psychological Testing, Social Work Summaries, I.E.P.C.'s, etc.)

To: **Vita Lusk** email: [Vita.Lusk@hazelparkschools.org](mailto:Vita.Lusk@hazelparkschools.org)  
**Director of Special Education**  
**Hazel Park Schools**  
**1620 E. Elza**  
**Hazel Park, MI 48030**  
**Fax (248) 544-5443**

Information Requested by:  
**Hazel Park Schools**

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_