

REQUEST FOR SCHOOL RECORDS

Name/Agency Requesting Records _____
Date _____ Relationship to Student _____
Students Name _____
Aliases and/or maiden name _____
Social Security # _____ - _____ - _____ Date of Birth _____
Address _____
City _____ State _____ Zip _____
Phone Number (_____) _____ (_____) _____
Last school attended _____
Dates/years attended/Graduation Date _____

I hereby authorize Franklin County School District to release the following records:

Authorization Signature _____ **Date** _____

Records requested:

ESE Records _____	Transcript _____
Shot Records _____	GED Records _____
Birth Certificate _____	Other: _____

Mail Records to: _____ Same as Above _____

Name _____ Attention _____

Address _____

City _____ State _____ Zip _____

To request student records prior to 1991, please mail request to Franklin County School District: Attention: Rosa Tolliver, 155 Avenue E, Apalachicola, Florida 32320 or fax request to 850-653-8984 or email information to Rosa at tolliver_r@firn.edu

To request student records from 1991 to present, please mail request to Franklin County School Attention: Sonja Buffkin, 1250 Highway 98, Eastpoint, Florida 32328 or fax request to 850-670-2801 or email information to Sonja at sbraswell224@aol.com

Please be advised that records prior to 1991 are archived and may be subject to a longer response time.