

SPERRY PUBLIC SCHOOLS 400 W. MAIN STREET SPERRY, OK 74073 Dr. Brian Beagles, Superintendent (918)288-7213 Fax (918) 288-7067

REQUEST FOR RECORDS

I hereby give-				
, ,	(Name of school or	ded)		
,	(Street Address)			
	(City, State			
Permission to release records on the student(s) listed below, as follows:				
 Health Attend 	n records, immunization lance records	pleted, including grade on shot dates, including ling Psychological test r	any pertinent medical	information
Student's Name		Grade	Date of Birth	-
Student's Name	3	Grade	Date of Birth	-
Student's Name	2	Grade	Date of Birth	-
Parent/Legal G	 uardian Printed Name	Parent/Legal Guardian S	ignature Date	