



Bridgman High School

Phone (269)465-6848 + Fax (269)466-0355
[HTTP://WWW.BRIDGMANSCHOOLS.COM](http://www.bridgmanschools.com)

PERMISSION TO RELEASE OFFICIAL RECORDS

Student Name: _____ Birthdate: _____

Former School: _____

Address: _____

Phone: _____ Fax: _____

Please fax the following records of the above named student:

- Transcript of credits earned/grades at date of withdrawal
- Immunizations on file
- Special education information, if available

Parent/Guardian signature

Date

Please mail complete CA-60 records to: **Bridgman High School**
9964 Gast Road
Bridgman, MI 49106

This form is provided to comply with the U.S. Family Educational Rights and Privacy Act of 1974 regarding the release of student records. Federal Law 99.31 states that *no parent signature is required for educational records sent to another educational agency.*

Together, challenging our children to succeed.

9964 Gast Road
Bridgman, MI 49106