Permission to Release Information

This is NOT a Transcript Request Form. You must request your transcripts through Naviance.

Student Name:_____ Date:_____

Student Address: _____

I, _____, hereby give my permission for Bedford Public Schools to release the information identified below either in writing to the colleges listed on this form.

Please send the following documents:
_____IEP _____Educational Testing _____Psychological Testing _____504 plan

*Colleges and universities make their own determinations for what reasonable accommodations are, on their campus, and will review recent **testing** to decide if a student requires accommodations.

To the following colleges: (Please include full college name and address)

1._____
_____
_____
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2._____
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3._____
_____
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_____

4._____
_____
_____
_____

5._____
_____
_____
_____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____