

**DOVER AREA SCHOOL DISTRICT**  
GUIDANCE/COUNSELING/CENTRAL REGISTRAR OFFICE

**CONSENT TO RELEASE STUDENT RECORDS**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I hereby authorize (previous school name, address AND #) \_\_\_\_\_

To release information (listed below) about the above named student to:

Dover Area High School  
4500 Intermediate Ave.  
Dover, PA. 17315  
ATTN: Guidance / Student Enrollment  
717-292-8066/Fax#717-292-2125  
**apresswood@doversd.org**

Dover Area Middle School  
46 West Canal Road  
Dover, PA 17315  
ATTN: Guidance / Student Enrollment  
717-292-8067/ Fax#717-292-4721  
**jerowand@doversd.org**

Dover Elementary  
109 East Canal Street  
Dover, PA 17315  
ATTN: Mrs. Karen Holtzapple  
717-292-8068/Fax#717-292-4645  
**kholtzapple@doversd.org**

Leib Elementary  
2925 Oakland Road  
Dover, PA 17315  
ATTN: Ms. Nicole Vance  
717-292-8070/Fax#717-292-4828  
**nvance@doversd.org**

North Salem Elementary  
5161 North Salem Church Rd.  
Dover, PA 17315  
ATTN: Mrs. Crystal Berkheimer  
717-292-8071/Fax#717-292-4388  
**cberkheimer@doversd.org**

Weigelstown Elementary  
3205 Carlisle Road  
Dover, PA.17315  
ATTN: Student Enrollment/Records  
717-292-8072/Fax#717-292-6390  
**tlmorthland@doversd.org**

Dover Administration Office  
101 Edgeway Road  
Dover, PA 17315  
ATTN: Central Registrar  
717-292-3671/Fax#717-292-9659  
**registration@doversd.org**

Dover Administration Office  
101 Edgeway Road  
Dover, PA 17315  
ATTN: Office of Exceptional Children  
717-292-3671/Fax#717-292-9659  
**kfunke@doversd.org**

*\*Parental permission is no longer required when records are requested by authorized school personnel (Family Education and Privacy Act, Final Rule on Education Records, Federal Register, June 17, 1976, Vol. 41, No. 118, Page 24673).*

**X** \_\_\_\_\_  
Parent/Guardian/Surrogate Signature

**X** \_\_\_\_\_  
Date

**\*\*DO NOT WRITE BELOW THIS LINE – SCHOOL USE ONLY\*\***

**SENDING SCHOOL:**

Please **email or fax** the following information to the above selected secretary:

- |   |  |
|---|--|
| <input type="checkbox"/> Official Transcript                      | <input type="checkbox"/> Current Class Schedule                    |
| <input type="checkbox"/> Report Card                              | <input type="checkbox"/> Career Portfolios                         |
| <input type="checkbox"/> Student Progress Reports                 | <input type="checkbox"/> Discipline Record                         |
| <input type="checkbox"/> Keystones/PSSA/State Required Testing    | <input type="checkbox"/> Attendance Records                        |
| <input type="checkbox"/> Standardized Tests                       | <input type="checkbox"/> Legal Documents (Custody agreements etc.) |
| <input type="checkbox"/> IEP/SPED/504/ELL Records – If applicable | <input type="checkbox"/> Health Records                            |
| <input type="checkbox"/> Birth Certificate                        |  |

Other pertinent Records (Birth Certificate, Reading Records, Custody Reports, Adoption Reports, 1302 Forms, etc.)

1<sup>st</sup> Request for records was sent on \_\_\_\_\_ by \_\_\_\_\_  
Date Requester's Signature

2<sup>nd</sup> Request for records was sent on \_\_\_\_\_ by \_\_\_\_\_  
Date Requester's Signature

Student Enrollment Date at the above selected School: \_\_\_\_\_