**Groveport Madison Local Schools**
**5940 Clyde Moore Dr**
**Groveport, OH 43125**

## PARENTAL CONSENT FOR RECORD RELEASE

To _____
Last School Attended/Building Administrator/Principal

Student _____ Birth date_____

_____
Address of previous school City State Phone Fax

You are authorized to release records to:

- ☐ Asbury Elementary
  5127 Harbor Blvd
  Columbus, OH 43232
  614-833-2000 Fax: 614-833-2004
- ☐ Dunloe Elementary
  3200 Dunloe Rd
  Columbus, OH 43232
  614-833-2008 Fax: 614-833-2007
- ☐ Glendening Elementary
  4200 Glendenning Dr
  Groveport, OH 43125
  614-836-4972 Fax: 614-836-4974
- ☐ Groveport Elementary
  715 Main St
  Groveport, OH 43125
  614-836-4975 Fax: 614-836-4680
- ☐ Madison Elementary
  4600 Madison School Dr
  Columbus, OH 43232
  614-833-2011 Fax: 614-836-4683
- ☐ Sedalia Elementary
  5400 Sedalia Dr
  Columbus, OH 43232
  614-833-2014 Fax: 614-833-2429
- ☐ Middle School North
  5474 Sedalia Dr
  Columbus, OH 43232
  614-837-5508 Fax: 614-833-2033
- ☐ Middle School South
  4400 Glendenning Dr
  Groveport, OH 43125
  614-836-4953 Fax: 614-836-4956
- ☐ Junior High
  751 Main St
  Groveport, OH 43125
  614-836-4957 Fax: 614-836-4999
- ☐ High School
  4475 S. Hamilton Rd
  Groveport, OH 43125
  614-836-4967 Fax: 614-836-4690

**Information to be released**: Academic, Health, Psychological, I.E.P., MFE, Attendance and Ohio Test Scores

Please Include SSID Number _____

**Reason for Request**: (Please Check)
_____ Aid in present and future educational decisions
_____ Other: _____

Date: _____ _____
Signature of parent/guardian

**>>>>>>>>>>>>>>>>>>>>>>>>>FOR SCHOOL USE ONLY>>>>>>>>>>>>>>>>>>>>>>>>>>**
Date request faxed/mailed: _____ By_____
Date copies released: _____ Date copies received: _____