



# Mapleton Local Schools

**Scott Smith, Superintendent**  
**DISTRICT IRN# 045831**

### Mapleton Elementary School

2 Mountie Drive  
Ashland, Ohio 44805  
Phone: (419) 945-2188  
Fax: (419) 945-8119

### Mapleton Middle School

635 County Road 801  
Ashland, Ohio 44805  
Phone: (419) 945-2188  
Fax: (419) 945-8166

### Mapleton High School

1 Mountie Drive  
Ashland, Ohio 44805  
Phone: (419) 945-2188  
Fax: (419) 945-8166

**Please send records to Cassie Keener @ Email- [mapl\\_ckeener@tccsa.net](mailto:mapl_ckeener@tccsa.net) or Fax- 419-945-8143**

## AUTHORIZATION AND REQUEST FOR RELEASE OF STUDENT RECORDS

_____	_____	
Date	Previous School	
_____	_____	_____
School Phone Number	School Fax Number	School Address

*I hereby authorize and request you furnish Mapleton Local Schools with the following information regarding:*

_____	_____	_____
Student's Full Name	Current Grade	Date of Birth
_____	_____	
Student's Complete Address	Home Telephone Number	

Anticipated Start Date: \_\_\_\_\_

### Reason for Request:

- |  |  |
|--|--|
| <input type="checkbox"/> Parent/Guardian Now Resides in Mapleton Local School District | <input type="checkbox"/> Foster/Court Placed in Mapleton Local School District |
| <input type="checkbox"/> Open Enrollment Approval on File                              | <input type="checkbox"/> Other: _____  |

### Please Send the Following Records:

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• Grades/Transcripts</li> <li>• Withdrawal Grades (if applicable)</li> <li>• Attendance Records</li> <li>• Medical/Immunization Records</li> <li>• Birth Certificate</li> <li>• SSID Number</li> <li>• Custody Documents (if applicable)</li> <li>• IEP/ETR (if applicable)</li> <li>• 504 Plan (if applicable)</li> </ul> | <ul style="list-style-type: none"> <li>• OAA/OGT/End of Course Test Scores</li> <li>• OELPS</li> <li>• AASCD</li> <li>• KRA Results</li> <li>• Standardized Achievement Test Results</li> <li>• Discipline Records</li> <li>• Psychological Evaluations</li> <li>• Other: _____</li> </ul> |
|---|--|

### PARENT/GUARDIAN AUTHORIZATION FOR RELEASE:

*I hereby release you and your facility from all legal responsibility and liability that may arise from furnishing information as I have authorized above.*

_____	_____
Signature of Parent/Legal Guardian	Date