



Plainview-Old Bethpage Central School District

**Office of Human Resources and Safety
106 Washington Avenue, Plainview, NY 11803**

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PLAINVIEW-OLD BETHPAGE CENTRAL SCHOOL DISTRICT
STUDENT RECORDS REQUEST

Student: _____ Date of Birth: _____
Address: _____ Telephone: _____

Records to be released from (SCHOOL YOUR CHILD PREVIOUSLY ATTENDED):

School Name: _____
Street Address: _____
City, State & Zip Code: _____
Telephone: _____
E-Mail: _____

Please email the following information:

- General school records
- Standardized & New York State test results
- Current Class Schedule
- Health/Immunization Records
- Individual Education Plan (IEP), 504 for Special Education, if applicable
- Transcript of Grades

Middle School/High School Only

- Regents/Competency Test Results
- Copies of Lab Reports for NYS Regents Science Courses

PLEASE FORWARD ALL INFORMATION TO THE ATTENTION OF (TO BE FILLED OUT BY POB SCHOOL):

School Name: _____
Street Address: _____
City, State & Zip Code: _____
Contact Name: _____
Telephone and/or Fax and E-Mail: _____

Parent Signature: _____

Date: _____