

**LAKE VILLA SCHOOL DISTRICT #41**  
**REQUEST TO RELEASE STUDENT RECORDS**

Student's Name \_\_\_\_\_

Student's Date of Birth \_\_\_\_\_

Student's Grade \_\_\_\_\_

I Hereby Give \_\_\_\_\_  
Name of Previous School

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

Permission for the release of all school records and health records, including all special education records (psychological reports, I.E.P.s, MDC reports, speech/language evaluations, social reports, etc.) regarding the student listed above.

Please mail records to:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> B.J. Hooper School<br>2400 Sand Lake Road<br>Lindenhurst, IL 60046<br>Phone: 847-356-2151<br>Fax: 847-356-0934            | <input type="checkbox"/> Olive C. Martin School<br>24750 West Dering Lane<br>Lake Villa, IL 60046<br>Phone: 847-245-3400<br>Fax: 847-245-4521      | <input type="checkbox"/> William L. Thompson School<br>515 Thompson Lane<br>Lake Villa, IL 60046<br>Phone: 847-265-2488<br>Fax: 847-265-2667 |
| <input type="checkbox"/> Peter J. Palombi Middle School<br>133 McKinley Avenue<br>Lake Villa, IL 60046<br>Phone: 847-356-2118<br>Fax: 847-356-0833 | <input type="checkbox"/> Lake Villa School District #41<br>131 McKinley Avenue<br>Lake Villa, IL 60046<br>Phone: 847-356-2385<br>Fax: 847-356-2670 |  |

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian