Admissions Office
2 Montessori Way
Camden, South Carolina 29020
Phone: 803.432.6828 Fax: 803.432.6422

Student Records Request

Parent Portion

I hereby authorize _____(name of school) / _____ (school district) to release the records listed below for my child:

_____ _____

Last Name **First Name** **Middle Initial** **Date of Birth**

to the Montessori School of Camden. I certify that all information provided is true to the best of my knowledge.

My child has an IEP, 504 or ELL Plan or is in the process of receiving one at this time. **YES** **NO**
Circle ONE

_____ _____

Parent/Guardian Signature Date

MSC Office Portion

Please release the following records:

__Cumulative School Records	__Gifted and Talented Profile Sheet (if applicable)
__Withdrawal Grades to Date	__Psychological Records (if applicable)
__State / National Standardized Test Scores	__Special Education Records (if applicable) (IEP and/or ENRICH Code
__Attendance & Discipline Records	__504 (if applicable)
__Birth Certificate	__ELL Accommodation Plan (if applicable)
__Home Language Survey	__ELL State Language Proficiency Test Scores
__Health and Immunization Records	__ELL Initial Placement
__Enrollment Survey (McKinney Vento Status)	__ Screener Information

Person completing form_____ **Title** _____

If you have any questions or you are unable to provide the requested information, please contact Krista Adams, Receptionist / Admissions at 803-432-6828 or admissions@montessori-camden.com.

MSC is a public charter school authorized by the Charter Institute at Erskine.

1st Request _____
2nd Request _____
Records Rec'd _____