



Reading Memorial High School Guidance Department

Respect, Responsibility, Perseverance, Scholarship

62 Oakland Road
Reading, MA 01867
Phone: 781-670-2813
Fax: 781-942-9133

Kathleen Boynton, *Principal*
Jessica Theriault, *Assistant Principal (9th, 11th grade)*
Craig Murray, *Assistant Principal (10th, 12th grade)*
Thomas Zaya, *Assistant Principal for activities, clubs, athletics*

Lynna Williams, *Director of Guidance*
Maura Keefe, *Guidance Counselor*
Steven Kennedy, *Guidance Counselor*
Lauren Meader, *Guidance Counselor*
Katherine Miele, *Guidance Counselor*
Ryan Sacco, *Guidance Counselor*

**WITHDRAWN STUDENT
RELEASE FOR INFORMATION**

Student: _____ Grade: _____ Date: _____

This is to certify that I, _____ do hereby authorize
Parent/Guardian (Name)

Reading Memorial High School to share my child's records and information as specified for the purpose of appropriate educational planning:

- Health records (immunization record and most recent physical)
- Official transcript
- Grades to date
- Standardized Test Results
- MCAS Scores (if applicable)
- School Profile
- SASID number
- Attendance records
- Discipline records
- 504
- Special Education records including the following:
 - Current Individualized Education Plan
 - Recent TEAM Evaluation Assessments
 - All Pertinent School Records
 - Other: _____

to be forwarded to (name/address of school transferring to):

_____ Print
Parent/Guardian (Name)

_____ Sign
Parent/Guardian (Name)

Phone Number: _____

Office Only: Official Withdrawal Date _____

Completed: