

**West Linn-Wilsonville School District #3JT**

West Linn High School  
5464 West "A" Street  
West Linn, Oregon 97068

**AUTHORIZATION FOR EXCHANGE OF CONFIDENTIAL INFORMATION**

Student \_\_\_\_\_ Date \_\_\_\_\_

Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

As a parent/guardian of the above named student, I hereby authorize the mutual exchange of confidential information between **West Linn High School** and/or

Previous School \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

**Records to be included are: (PLEASE SEND ALL RECORDS)**

- ✓ Cumulative File
- ✓ Special Education Records
- ✓ Immunization Records
- ✓ Transcript
- ✓ Withdrawal Form
- ✓ CIM Scores (State of Oregon ONLY)
- ✓ Current Physical Form

Parent/Guardian Signature \_\_\_\_\_

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

City/State/Zip \_\_\_\_\_

In accordance with the requirements of the Family Educational Rights and Privacy Act of 1974, information sent or received by the Public School may not be shared with any other party without the written consent of the parent/guardian, or the pupil, if eighteen years or older.

**Please send all confidential information to:**

Kate Fryrear, Registrar  
West Linn High School  
5464 West "A" Street  
West Linn, Oregon 97068  
Phone: 503-673-7814  
Fax: 503-657-8710