

APPLICATION TO REVIEW STUDENT'S RECORDS  
**AND CONSENT THERETO BY PARENT OR STUDENT**

Winchester Public Schools

Winsted, Connecticut 06098

I, \_\_\_\_\_, have hereby requested access to

\_\_\_\_\_ following reasons: \_\_\_\_\_

\_\_\_\_\_

Said records will not be made available to any other person or persons without the specific written consent of (Parent-Student)

DATED: \_\_\_\_\_

CONSENT \_\_\_\_\_

I hereby consent that \_\_\_\_\_ have access to my child's (to my) records with the understanding that such records will not be released by them to other persons without my further consent.

Signature: \_\_\_\_\_ Dated \_\_\_\_\_