



SCHOHARIE ELEMENTARY SCHOOL

Andrea L. Polikoski
Elementary Principal
apolikoski@schoharieschools.org

PO Box 430, 126 Academy Drive
Schoharie, NY 12157
Phone: 518-295-6651
Fax: 518-295-9506

Authorization for the Release or Transfer of Records

Student Name: _____ **Date of Birth:** _____
Name and address of school last attended: _____ **Current Grade:** _____
School: _____
Address: _____
City, State, Zip code _____
Phone Number: _____ **Fax Number:** _____

Signature of Parent or Guardian

Date

Print Name Above

Relationship to Student

The above student has enrolled in the Schoharie Central School District. Please forward the following information at your earliest convenience.

Please submit **ALL APPLICABLE RECORDS** including:

1. All Report Cards
2. Birth Certificate
3. Cumulative Health Records/
Immunization Records
4. All Standardized Test Scores
5. Special Education Records
6. Psychological Report
7. Attendance Records
8. Discipline Records
9. 504 Plan

Please Send Records to: Schoharie Elementary School
PO Box 430, 126 Academy Drive
Schoharie, NY 12157
Fax: 518-295-9506

Jessie Griffin – Administrative Support II
jgriffin@schoharieschools.org

Karen Gannon – Administrative Support I
kgannon@schoharieschools.org