



Phone: 860-376-7610  
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**GRISWOLD ELEMENTARY SCHOOL**  
**303 SLATER AVENUE**  
**GRISWOLD, CT 06351**

**Joseph Bordeau, Principal**  
**Jacqueline Love, Assistant Principal**

## Authorization for Release of Records

To Whom It May Concern:

The student listed below has entered Griswold Elementary School. Please forward the following records:

- Scholastic
- Health
- Special Services
- Any Other Pertinent Information

Please forward free/reduced meal or free milk application if applicable.

Within the state of Connecticut, please forward the original health folder as prescribed by law (Section 10-206d, Connecticut General Statutes).

A photocopy of this release will be deemed to be the same as the original and can be used for the same purpose.

Sincerely yours,

Joseph Bordeau  
Principal

Name of School last attended: \_\_\_\_\_

Grade last attended \_\_\_\_\_

I hereby authorize the release of records for my child, \_\_\_\_\_  
to Griswold Elementary School.

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

\_\_\_\_\_  
Date