

McLean County Unit District No. 5

**CHIDDIX JUNIOR HIGH SCHOOL  
AUTHORIZATION FOR RELEASE OF INFORMATION**

Date \_\_\_\_\_

Student's Previous School Name: \_\_\_\_\_

Previous School Address: \_\_\_\_\_

City/ State/ Zip Code: \_\_\_\_\_

Phone/Fax #: \_\_\_\_\_

Please release the following information for: \_\_\_\_\_

Student Name

\_\_\_\_\_ Cumulative Record

\_\_\_\_\_ Birth Certificate

\_\_\_\_\_ Health Records

\_\_\_\_\_ Psychological Records

To: Chiddix Junior High School  
Guidance Office Records - Pattie Homann  
300 S. Walnut Street  
Normal, IL 61761  
Phone # 309-888-6847  
Fax# 309-888-6845

If *Special Education Records*, please send

To: Eugene Field Special Services Center  
Attn: Records  
412 East Cypress Street  
Normal, IL 61761  
Phone: 309-454-2220  
Fax: 309-888-6013

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

\*\*\*\*\*IN ACCORDANCE WITH REVISED FEDERAL AND STATE STATUTES, PERMISSION OF THE PARENT OR ADULT STUDENT IS NO LONGER REQUIRED WHEN RECORDS ARE REQUESTED BY AUTHORIZED SCHOOL PERSONNEL. \*\*\*\*