

**COLUMBIA COUNTY SCHOOL SYSTEM
Transfer of Records Authorization**

I, _____, hereby authorize
PRINT Student, Parent, Guardian

School Last Attended	Address	City/State	Zip Code
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to release all academic and disciplinary records for _____
Name of Student

born on _____.
Birth Date

PLEASE ANSWER THE QUESTIONS BELOW

	YES	NO
Has student ever been convicted of a felony/misdemeanor? If yes, specify:		
Does student have any charges pending as of this date? If yes, specify:		
HAS STUDENT BEEN FOUND GUILTY OF COMMITTING ONE OR MORE OF THE FOLLOWING DESIGNATED FELONIES?		
Possession of pistol or revolver (second offense)		
Kidnapping (13 years or older)		
First degree arson (13 years or older)		
Aggravated assault (13 years or older)		
Second degree arson (13 years or older)		
Aggravated battery (13 years or older)		
Robbery (13 years or older)		
Armed robbery not involving a firearm (13 years or older)		
Battery of school personnel (13 years or older)		
Attempted murder (13 years or older)		
Attempted kidnapping (13 years or older)		
Possession of a weapon on school property, including buses, or in a school zone (13 years or older)		
Hijacking a motor vehicle (13 years or older)		
Manufacture, transportation, distribution, possession, use or offer of distribution of an explosive device (13 years or older)		
Third offense of any act which, if committed by an adult, would be a felony		
Trafficking in cocaine, illegal drugs, marijuana, or methamphetamine		
Racketeering		
Escape after being found guilty of a felony		
Manufacture, possession, transportation, distribution, or use of a hoax destructive device or detonator and interference in the detection, disarming, or destruction of a destructive device (second offense)		
Murder		
Voluntary manslaughter		
Rape		
Aggravated sodomy		
Aggravated child molestation		
Aggravated sexual battery		
Armed robbery with a firearm		
Motor vehicle theft (second offense)		

Date student was found guilty: _____

Jurisdiction in which adjudication occurred: _____
State
Court
County

Sentence imposed: _____

Is student currently serving a suspension or expulsion? [] Yes [] No If yes, describe reason for suspension or expulsion and when the suspension or expulsion will end: _____

SEE REVERSE SIDE

I understand that my child will be enrolled on a conditional basis in the Columbia County School System until the records are received. I further understand that my child may be found ineligible for enrollment at this time based on information about current suspensions or expulsions obtained from the student's record.

I certify that the information provided above is true to the best of my knowledge.

Signature of Parent/Guardian

Date