



*"Where Panthers  
Roar  
And  
Students Soar"*

**NASHUA HIGH SCHOOL SOUTH**

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**RELEASE OF INFORMATION**

I hereby grant permission to Nashua High School South Nursing Staff to request and/or release the data listed below regarding \_\_\_\_\_ which will help aid in educational planning. Please circle the number of all that apply.

1. Permanent record, which includes the student's grades, standardization testing information and other data regarding the student and his/her home.
2. Information concerning individual intelligence and aptitude test results, interest inventory results, health data and verified reports of serious or recurrent behavior patterns
3. Information which relates to clinical findings, disciplinary or counseling actions, building pupil personnel team notes and findings and other data which will allow us to better meet the needs of the students.
4. Information and/or consultation with the physician/provider for student.

Health office: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Representative Name/Title: \_\_\_\_\_

School Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_