



**TRINITY EVANGELICAL  
LUTHERAN CHURCH  
AND SCHOOL**  
CROWN POINT, INDIANA

*Together we hear, know and feed upon Jesus Christ, God's living  
Word, growing in Him and sharing Him to the glory of God.*



**Rev. David A. Easterday**  
*Senior Pastor*

**Rev. David P. Kipp**  
*Associate Pastor*

**John E. Schultz**  
*School Principal*

**Paul R. Wendt**  
*Dir. of Christian Education*

**Karol Ketcher**  
*Music Director*

**Brandon D. Grelle**  
*Dir. Of Contemp. Worship & Youth*

## PARENT CONSENT TO RELEASE RECORDS

I hereby consent to the release of records by \_\_\_\_\_,  
(school last attended)

located at \_\_\_\_\_,  
(street address) (city, state, zip)

of a copy of \_\_\_\_\_ records to be sent  
(student's name) (birthdate)

TO: Trinity Lutheran School  
250 S. Indiana Avenue  
Crown Point, IN 46307  
Attention: Lisa Ann Cizmar

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

\_\_\_\_\_  
Date

The student listed above has enrolled in grade \_\_\_\_\_ in our school, effective \_\_\_\_\_.  
Please send all HEALTH AND IMMUNIZATION RECORD, CUMULATIVE RECORDS,  
ACHIEVEMENT TEST SCORES, PSYCHOLOGICAL EVALUATIONS/TESTING, and  
IEP INFORMATION (if applicable).

School or school systems are not required to have parental or student approval to release records to other school systems in which a student intends to enroll.

Please refer to: General Education Provision Act-Section 438, Title IV-Public Law 90-247  
as amended (added by Section 513 of Public Law 93-380, amended by  
Section 2 of Public Law 93-568)