

# South Carolina Association of Independent Home Schools Records Release Form

For student named: \_\_\_\_\_

*I give my permission to the South Carolina Association of Independent Home Schools (SCAIHS) to request my child's permanent records including, if applicable, all special education records from the school named below.*

\_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE OF PARENT OR LEGAL GUARDIAN

Please print.

Name of Guidance  
Counselor or School  
Official: *(If known)* \_\_\_\_\_

School Name: \_\_\_\_\_

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

\_\_\_\_\_ City State Zip

School Phone Number: (\_\_\_\_\_) \_\_\_\_\_

School Fax Number: (\_\_\_\_\_) \_\_\_\_\_

Parents'/Guardians' Names: \_\_\_\_\_

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

\_\_\_\_\_ City State Zip

Student's Full Name: \_\_\_\_\_

Student's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student's Grade Level for the \_\_\_\_\_ - \_\_\_\_\_ school year: \_\_\_\_\_

If home schooled, did you home school—(Check all that apply)

- out-of-state?
- through the local public school district?
- through another association? (name of assn.: \_\_\_\_\_)
- through an association that provides an *official* transcript?

**When a middle school or high school student** is enrolled in SCAIHS without an official transcript, achievement test scores and a report card from the previous year must be submitted with the application. If test scores are not available, please contact the SCAIHS office to discuss alternatives. If your student has already taken high school courses, contact SCAIHS about further necessary documentation.