



**407 CENTRAL AVE  
GRAMBLING, LA 71245  
CONFIDENTIAL RECORDS DISCLOSURES**

STUDENT: \_\_\_\_\_

The following persons are authorized to examine this confidential file.

1. Executive Director
2. Assistant Directors
3. Supervisor of Special Education
4. Pupil Appraisal Personnel
5. Special Education Clerical Staff
6. Principals, Assistant Principals and Guidance Counselors
7. Principal's Secretary
8. Teachers/Paraprofessionals currently serving the student
9. Parents/Guardian
10. La State Dept. of Education Monitoring Personnel  
(Only after complete identification has been established)
11. Other (Specify)

_____	_____	_____	_____
Date	Name	Title	Reason for Examination
_____	_____	_____	_____
Date	Name	Title	Reason for Examination
_____	_____	_____	_____
Date	Name	Title	Reason for Examination
_____	_____	_____	_____
Date	Name	Title	Reason for Examination
_____	_____	_____	_____
Date	Name	Title	Reason for Examination