**RECORDS REQUEST FORM**

2016-2017

**Student:**

**DOB:**   **Grade:**

Please provide the following items for the above listed student to:

 **Attn:**

**Fax:**

* STUDENT TRANSCRIPT & TEST SCORES
* HEALTH & IMMUNIZATION RECORDS
* COPY OF LAST REPORT CARD
* TRANSCRIPT
* ATTENDANCE RECORDS
* IEP, IIP, OR 504 PLAN
* ELIGIBILITY COMPONENTS
* PSYCHOLOGICAL EVALUATION & REPORTS
* SOCIAL HISTORY REPORT
* EDUCATIONAL EVALUATIONS & REPORTS
* DISCIPLINE RECORDS

I give consent for the release and exchange of records.

Parent/ Guardian Signature: Date: