

**PARENT REQUEST FOR STUDENT RECORDS**

Date of Request: \_\_\_\_\_

Student: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

**Check All Documents Requested:** *(a minimum of 24 hours needed to process all requests)*

- Immunization or Ear, Eye & Dental Certificate (can be sent home with child)
- TAG Testing forms
- Attendance Report
- Student's latest IEP and/or Special Education Records
- Psychological and Eligibility Reports
- Standardized test records
- ESOL info
- Copy of Transcript
- Official Sealed Transcripts – mailed directly to requesting school OR given to parent in official sealed envelope
- Birth certificate or SSN
- Withdrawal papers

**Reason for request:**

- Private School Application
- INS purposes
- DFACS request
- After school care program
- Transfer Pre-Enrollment request - his/her last day will be \_\_/\_\_/\_\_; Withdrawal form has been filled out by parent.
- Other: \_\_\_\_\_

\*\*\*\*\*

Please mail my copies to: \_\_\_\_\_  
\_\_\_\_\_

I will pick up my copies. Call me when they are ready: (\_\_\_\_) \_\_\_\_\_  
*For security purposes, we have a No Fax policy.*

\_\_\_\_\_  
Print Parent/Guardian Name

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

*Request Received* \_\_/\_\_/\_\_

*Date Request Completed* \_\_/\_\_/\_\_