



Kim White
Superintendent

REQUEST FOR STUDENT RECORDS

Student Name _____

Date: _____

Date of Birth: _____

Grade: _____

According to the Family Educational Rights and privacy Act, dated June 17, 1976, it is no longer necessary to obtain written consent to release student records between schools. It states that school officials, including teachers within the education institution and officials of other school systems in which the student may intend to enroll, may receive a student's records without a written consent for such release.

Please send records which include the following:

- Grades for prior academic school years
- Grades for current academic school year through date of withdrawal
- Standardized test scores
- Health and immunization information
- Attendance history
- Discipline history
- Special needs information including IEPs, Evaluations & Staffing needs

Previous School Attended		
Name: _____		
Address _____	City _____	State _____
Phone: # _____	Fax _____	Email _____

Please send requested records and this completed from to:

Silverton Public School
PO Box 128
Silverton, CO 81433-0128
Fax: 970-387-5791
Phone: 970-387-5543
Email: earchuleta@silvertonschool.org