

SCHOOL DISTRICT OF ELMWOOD
REQUEST FOR STUDENT RECORDS

To Previous School Attended:

Name of Previous School

Street Address

City, State, Zip

Please send us the official school records for _____

grade _____, date of birth _____, who enrolled in our school on

_____. Please include:

- *Transcript (courses taken, grades earned, credits, explanation of your grading system, dates of attendance, attendance record, grade point average, class rank, grade level completed, schools attended, identifying information, co-curricular activities)
- *Grades for current school year
- *Standardized test results
- *Health record
- *Psychological services report, if any
- *Special education information, if any
- *Social worker involvement, if any
- *Limited English Proficiency help, if any
- *Other information which may be helpful in admission or placement of this student

Parent's Signature

Please send above information to:

School District of Elmwood
213 S. Scott St.
Elmwood, WI 54740

Thank you for your cooperation.

Fax # (715)639-3110

IN ACCORD WITH REVISED FEDERAL AND STATE STATUTES, PERMISSION OF THE PARENT OR ADULT STUDENT IS NO LONGER REQUIRED WHEN RECORDS ARE REQUESTED BY AUTHORIZED SCHOOL PERSONNEL. (Family Educational Rights and Privacy Act, 34 C.F.R. 99.31 and 99.34) {s 188.125(4), WI Statutes}