



**Request for Student Records**

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

Originating School or Institution

Name of Previous School or Agency: \_\_\_\_\_

Street Address: \_\_\_\_\_ Fax # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Student's Information

Legal Name: Last	_____
First	_____
Middle	_____

Birth Date: \_\_\_\_\_ Colorado ID # (SASID#): \_\_\_\_\_

Grade Level: \_\_\_\_\_ Last date of attendance (approx.): \_\_\_\_\_

Signature of Parent/Guardian (if available) \_\_\_\_\_

The following records are hereby requested:

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|--|--|
| <input type="checkbox"/> Transcripts or report cards                       | <input type="checkbox"/> Discipline records            |
| <input type="checkbox"/> Test data / standardized test scores              | <input type="checkbox"/> Immunization records          |
| <input type="checkbox"/> English Language (ELL) test score (if applicable) | <input type="checkbox"/> Health / medical records      |
| <input type="checkbox"/> List of courses and grades at time of withdrawal  | <input type="checkbox"/> Sports physical documentation |
| <input type="checkbox"/> Attendance records                                | <input type="checkbox"/> Psychological records         |
| <input type="checkbox"/> Individual Literacy Plan (if applicable)          | <input type="checkbox"/> Sociological records          |
| <input type="checkbox"/> IEP, Evaluation, and Eligibility (if applicable)  | <input type="checkbox"/> Copy of birth certificate     |
| <input type="checkbox"/> 504 Plan (if applicable)                          | <input type="checkbox"/> Other _____                   |

Signature of Requesting School Representative:

Signature	Title	Date
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PLEASE MAIL/FAX TO THE FOLLOWING SCHOOL – ATTN: REGISTRAR:

<input type="checkbox"/>	Woodland Park High School	PO Box 6820	Woodland Park, CO 80866	719-687-8411
<input type="checkbox"/>	Woodland Park Middle School	PO Box 6790	Woodland Park, CO 80866	719-687-8458
<input type="checkbox"/>	Columbine Elementary School	PO Box 6700	Woodland Park, CO 80866	719-687-8473
<input type="checkbox"/>	Gateway Elementary School	PO Box 6670	Woodland Park, CO 80866	719-687-8475
<input type="checkbox"/>	Summit Elementary School	PO Box 339	Divide, CO 80814	719-687-8469

The Family Educational Rights and Privacy Act (20 U.S.C. § 1232g; 34 CFR Part 99), as revised, states (a) An educational agency or institution may disclose personally identifiable information from an education record of a student without the written consent of the parent of the student or the eligible student if (1) The disclosure is to other school officials, including teachers, within the agency or institution has determined to have legitimate educational interests. (2) The disclosure is to officials of another school or school system in which the student seeks or intends to enroll.