

REQUEST FOR STUDENT RECORDS

Central Valley School District No. 356



Central Valley School District No. 356
19307 East Cataldo Avenue
Spokane Valley, WA 99016
Phone:(509) 228-5400

REQUESTING SCHOOL

ADDRESS: _____

PREVIOUS SCHOOL

ADDRESS: _____

**In Compliance with the
Family Education Rights and Privacy
Act of 1974**

_____ **20** _____

ITEM A: Please send the transcript of the cumulative and immunization record for the following student(s) now enrolled in our school. (This should include all discipline records and withdrawal grades.)

STUDENT NAME			GRADE	STUDENT BIRTHDATE
LAST	FIRST	INITIAL	_____	_____
LAST	FIRST	INITIAL	_____	_____
LAST	FIRST	INITIAL	_____	_____

SIGNATURE OF SCHOOL RECORDS DESIGNEE

ITEM B: If applicable, please send any confidential psychological, special education or guidance records which may exist for the above students.

SIGNATURE OF PARENT/GUARDIAN/CUSTODIAN

Note: A Parent/Guardian/Custodian signature is necessary in order to release Item "B" Records.

All information concerning the above-named student(s) will be placed in the child's record and will be available for inspection and review in accordance with the requirements of the *Family Education Rights and Privacy Act of 1974*.

WHITE: Releasing School Copy
YELLOW: Student file