



"Learning Today, Leading Tomorrow"

### REQUEST FOR RECORDS

Today's Date \_\_\_\_\_ First Date of Attendance \_\_\_\_\_

Student \_\_\_\_\_ Grade \_\_\_\_\_ Birth date \_\_\_\_\_

Last School Attended \_\_\_\_\_ Last School District \_\_\_\_\_

School Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

School Phone (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

**Please forward the following information:**

- All academic and test records  
*(including state test records, constitution test information, and school grading scale)*
- Attendance records
- School profile and/or schedule information
- Health and immunization records
- Withdrawal date and grades if transferring during the current school year
- Any psychological or educational evaluation(s) completed by your school, outside agency, or treatment center, including special education testing and the **Current Diagnostic Summary and IEP/Section 504/Title II Plan**
- Any testing regarding the Gifted Program
- Any testing regarding the ELL/ESL Program
- Disciplinary records

The Family Educational Rights and Privacy Act (Buckley Amendment) dated June 17, 1976, states that the signature of a parent or guardian IS NOT REQUIRED for school records to be sent to another educational facility. However, when a parent or guardian is available, we do require his/her signature.

I give permission for records to be released to Discovery Ridge Elementary.

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

\_\_\_\_\_  
Date

Thank you for your cooperation.

**MAIL OR FAX RECORDS TO:**

Discovery Ridge Elementary  
2523 Sommers Road  
O'Fallon, MO 63367  
Phone: 636-561-2354  
FAX: 636-561-2355

[attendance.discoveryridge@wsdr4.org](mailto:attendance.discoveryridge@wsdr4.org)