

**Request for Student Records**

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

Originating School or Institution: Hillside Seventh-day Adventist School

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

Street Address: \_\_\_\_\_

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

Student's Information

Legal Name:	Last	_____
	First	_____
	Middle	_____

Birth Date: \_\_\_\_\_

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

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

The following records are hereby requested, if applicable:

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

Signature of Requesting School Representative:

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Signature	Title	Date
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PLEASE EMAIL TO: [iwillis@hillsidesdaschool.org](mailto:iwillis@hillsidesdaschool.org).

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.