



RECORDS REQUEST FORM

Student Name: _____

The above named student has enrolled in our school. Please forward his/her records:

- Transcript of Grades/Report Card
- Standardized Testing Results
- Health Forms
- Attendance Records
- IEP and/or 504 Plan
- Detailed Discipline Records
- Detailed Special Education Records

You can email records to Ms. Nicole Nealey, nnealey@charlestdiocese.org, or you can mail them to the address below. Thank you

Sincerely,

Mrs. Karen Luzzo, B.A., M.S.
Principal

Name of School: _____

Address: _____

I hereby authorize the above named school to forward my child's records as well as direct communication with any school personnel.

Parent/Guardian's Signature

Date