REQUEST FOR RECORDS

COMMUNITY UNIT SCHOOL DISTRICT 201

Name & Address of Previous School:

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|  |

Principal:

The following pupil(s) has (have) enrolled at Westmont Junior High School in Westmont, Illinois, in the grade(s) indicated. Please send all available records, including test and health records, as soon as possible.

|  |  |  |
| --- | --- | --- |
|  | Grade: |  |
|  | Grade: |  |
|  | Grade: |  |

Thank you for your prompt attention.

|  |  |  |  |
| --- | --- | --- | --- |
| Principal |  | Date |  |

|  |  |
| --- | --- |
| I, |  |

give my permission to release the school records of my child/children:

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|  |
|  |

to the school indicated below. This includes all information available:

If not “yes,” check appropriate blanks.

|  |  |  |
| --- | --- | --- |
| Yes | No |  |
|  |  | Health/medical data, academic records, attendance records. |
|  |  | Test Scores |
|  |  | Special education information |
|  |  | Psychological |

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Parent/Guardian Signature Date

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| South Early Childhood Center133 South GrantWestmont, IL 60559 | CE Miller School125 West TraubeWestmont, IL 60559 | JT Manning School200 North LindenWestmont, IL 60559 | Westmont Junior High School944 North Oakwood DriveWestmont, IL 60559 | Westmont High School 944 North Oakwood DriveWestmont, IL 60559 |