



LINDON
LEOPARDS

ALPINE SCHOOL DISTRICT
LINDON ELEMENTARY SCHOOL

30 N Main Lindon UT 84042

Scott Gonsalves, Principal

Phone: 801.610.8111 Fax: 801.785.8749

RELEASE OF INFORMATION

Transferring from:

School Mount Mahogany

City Pleasant Grove State UT

Fax # 801.785.8798

Please send ALL school/student records (including Special Education, Confidential, Psychological, Speech/Hearing and all testing) concerning the following student/ students:

Name Zander Elertson Grade K Birthdate 3/29/2017

Name _____ Grade _____ Birthdate _____

Name _____ Grade _____ Birthdate _____

Name _____ Grade _____ Birthdate _____

Have any of your students received Special Education services? YES _____ NO _____

If YES, which student and what services: _____

You are hereby authorized to release and forward the records of my child/children.

[Signature]
Parent / Guardian / School Official

10/6/22
Date

Sent
10/6/22
SGamer0

Zander Bjorn Ellertson
1037 N 500 W
Sant Grove, UT 84062
Guardian: Rachel Petrina Ellertson

Other ID: 9426679
Grade: 00
Phone: (801)850-4301
Birthdate: 03/29/2017

Homeroom: 166
Teacher: Leslie Holman
Term: 01
Ethnicity: W

Withdrawal Date: 10/6/22

Withdrawal Code: TD

08/16/2022 - 10/12/2022

Period	Course Name	Teacher	Room	*Grade	Books/Fines	Teacher Signature
01	Attend-Kinder	Holman,Leslie	166			
01	Language Arts K	Holman,Leslie	166			
02	Math K	Holman,Leslie	166			
03	Science K	Holman,Leslie	166			
04	SocialStudies K	Holman,Leslie	166			
05	LearningHabitsK	Holman,Leslie	166			
06	Music K	Holman,Leslie	166			
	Art K	Wilkins	102			
08	PE K	Cindrich	Gym			
09	Ed Tech K	Heidi Smith	134			

New School: Lindon Elem.

Library: _____ Amount Due: _____

Administrator: _____

Office: Staci Gamro Amount Due: _____

Counselor: _____

Book Refund: _____ Amount Due: _____

Night School: _____

Year Book: _____ Amount Due: _____

Registrar: _____

Activity Cd: _____ Fee: _____

Locker #: _____ Chk: _____

Cafeteria: _____ Balance: _____

Student Signature: _____

* Parent/Guardian Signature: _____

Receipt #: _____

Amount Paid: _____

Check #: _____

* Not Needed At Year-End Checkout