

# Alpine Elementary School

400 E 300 N Alpine, UT 84004  
 Phone: (801) 610-8710 Fax: (801) 763-8527

## Request for Permanent Records

Last School Attended: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Fax Number: \_\_\_\_\_

| Student's name | Birthdate | Grade student will be going into |
|----------------|-----------|----------------------------------|
|                |           |                                  |
|                |           |                                  |
|                |           |                                  |
|                |           |                                  |

Please forward ALL records for the above named student(s) to **Alpine Elementary**.

In compliance with the Family Education Rights and Privacy Act of 1974 which requires consent for the release of certain information, I hereby give consent for you to release, to the school listed at the top of this page. Please include all school records including **special education records, confidential reports, psychological testing, 504, birth certificate, and immunization records** for the children

Parent/Guardian Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use (Please drop the above students from Skyward. Thank you.)

| Requested Records | Rec'd | Excel | Skyward | Chinese | 00A | Special Ed. Records |
|-------------------|-------|-------|---------|---------|-----|---------------------|
| 1st               |       |       |         |         |     | yes                 |
| 2nd               |       |       |         |         |     | no                  |