



Valley School

3034 Huffman Rd., Valley WA 99181
Phone: (509) 937-2413 Fax: (509) 937-2204

NOTIFICATION OF RELEASE / EXCHANGE OF STUDENT INFORMATION

Student records and information will be requested from the school/district previously attended. Please provide the following information and return this form to the school office:

Student Name _____ Birthdate _____ Grade _____

Student Name _____ Birthdate _____ Grade _____

Student Name _____ Birthdate _____ Grade _____

Student Name _____ Birthdate _____ Grade _____

Parent/Guardian Name _____

Current Address _____ City _____

State/Zip _____ Phone(s) _____

RECORDS REQUEST SHOULD BE SENT TO (Last School/District Attended):

School _____ **District** _____

Address _____ **Phone** _____

City _____ **State/Zip** _____ **FAX** _____

FOR SCHOOL USE ONLY

Please send the following records directly to: Valley School
Attn: _____
3034 Huffman Road, Valley, WA 99181
FAX: (509) 937-2204

Progress records: transcripts of grades and courses taken, records of attendance and tests relating specifically to achievement or measurement of ability, and record of health

Behavioral records: include psychological tests, special education records, personality evaluations, records of conversations and any written transcript of incidents relating specifically to student behavior.

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Date Enrolled _____ By _____

Date Request Sent _____ By _____

Date Records Received _____ By _____