

Vista Heights Middle School

484 W. Pony Express Parkway, Saratoga Springs, UT 84045

School Number 801.610.8770 Fax Number 801.768.4226

Vistaheights.alpinedistrict.org

Todd Dawson, Principal

Derek Reynolds, Jamie James, and Matt Rowe, Assistant Principals

REQUEST FOR STUDENT RECORDS

PREVIOUS SCHOOL NAME: _____

ADDRESS, CITY & STATE: _____

PHONE & FAX NUMBER: _____ / _____

Please **FAX** copies of the following information to Vista Heights Middle School as soon as possible for:

CHILD'S NAME: _____

DATE OF BIRTH: _____

CURRENT GRADE LEVEL: _____

- | | |
|---|--|
| <input type="checkbox"/> Withdrawal Grades | <input type="checkbox"/> Discipline Records |
| <input type="checkbox"/> Transcripts | <input type="checkbox"/> IEP or 504 (Current copies) |
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Test Scores |
| <input type="checkbox"/> Immunization Records | <input type="checkbox"/> Custody Records |
| <input type="checkbox"/> CUM Folder | <input type="checkbox"/> Other: _____ |

****Please send the students CUM records to attention: Registrar-Mrs. O'Connor to the address above.***

Date requested: _____ (1st) (2nd) (3rd)

A school district may request student records from another school the student has attended without parent signature of approval. See "Privacy Act" Section 438, Subsection (b).

NOTE TO PARENT: It is your responsibility to accurately and completely furnish the above information so that your child may be promptly enrolled in appropriate classes. Without this information we will be unable to transfer your child's credits to any schools he may attend in the future. Int. _____ Date: _____