



Shoshoni School

404 Wrangler Way

SHOSHONI, WYOMING 82649

Elem: 307-876-2563 Secondary: 307-876-2576

Elem Fax: 307-876-2542 Secondary Fax: 307-876-9325

REQUEST FOR SCHOOL RECORDS FORM

THE FOLLOWING STUDENT HAS ENROLLED IN OUR SCHOOL. PLEASE SEND:

- ❖ ACADEMIC TRANSCRIPTS
- ❖ HEALTH RECORDS
- ❖ BIRTH CERTIFICATE
- ❖ SPECIAL EDUCATION RECORDS
- ❖ PSYCHOLOGICAL REPORTS
- ❖ TEST RECORDS
- ❖ ANY OTHER PERTINENT INFORMATION

IF HE/SHE LEFT BEFORE THE END OF THE SEMESTER, PLEASE STATE THE COURSES IN WHICH THE STUDENT WAS REGISTERED, LETTER GRADES AT THE TIME OF WITHDRAWAL, AND THE WITHDRAWAL DATE.

STUDENT'S NAME _____

GRADE _____ DOB _____

PREVIOUS SCHOOL _____

ADDRESS _____

PHONE _____

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FAX _____

**NOTE: FEDERAL LAW 99.31 STATES:
NO PARENT SIGNATURE REQUIRED FOR EDUCATIONAL
RECORDS SENT TO ANOTHER EDUCATIONAL AGENCY.**