

**SCHOOL RECORD INFORMATION**

**Date Requested:** \_\_\_\_\_

**NAME: First                      Middle                      Last (When attended school)**

\_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**SCHOOL ATTENDED:** \_\_\_\_\_

**GRADUATED? YES OR NO (If YES, what year graduated if NO what was last grade attended?)** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DRAWER:** \_\_\_\_\_

**FILE:** \_\_\_\_\_

**COPY MAILED:** \_\_\_\_\_

**\*NOTE:**            **There will be a \$10.00 charge on all copies for student records effective January 1, 2008.**