



Rolling Hills Public Charter School

8900 N Horseshoe Bend Road, Boise, ID 83714

(208) 939-5400, Fax (208) 939-5401, Email: contact@rhpcs.org

Website: www.rhpcs.org

REQUEST FOR TRANSFER OF STUDENT RECORDS

Date of Request: _____

To:

Via Fax #: _____

Phone #: _____

The following student has enrolled at Rolling Hills Public Charter School for/during the 2018-2019 school year. The student began/will begin at RHPCS on _____.

Student Name: _____ D.O.B. _____ Grade in 2018-2019 _____

Please forward student records, including:

- _____ **All school records** (include any confidential and/or Special Education records, if applicable.)
- _____ Progress Records (include transcripts, attendance records, standardized test results e.g. IRI & ISAT, etc.)
- _____ Health Information (include birth certificate, immunization records, vision/hearing/health screening)
- _____ Behavioral Records (Disciplinary history, psychological test results, personality evaluation, medical info.)
- _____ Special Services Records (include current IEP & Eligibility Report, 504 Accommodation Plan, LEP, Gifted/Talented)
- _____ Speech/Language/Hearing Records
- _____ Other _____

Additional comments: _____

I request that the records checked above be released and forwarded to Rolling Hills Public Charter School.

Signature of Parent/Guardian _____ Date: _____

Please forward records to Rolling Hills Public Charter School at the address listed at the top of the page.

Note: Federal Law 99.31 specifies that no parental signature is required for educational records to be release to another educational agency.