

**REQUEST FOR TRANSFER OF EDUCATIONAL  
RECORDS FOR PLACEMENT PURPOSES**

**DALLAS SCHOOL DISTRICT #2**  
Dallas, Oregon 97338

TO: \_\_\_\_\_  
School

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

RE: \_\_\_\_\_  
Last Name First Name M.I. Date of Birth Grade

RE: \_\_\_\_\_  
Last Name First Name M.I. Date of Birth Grade

RE: \_\_\_\_\_  
Last Name First Name M.I. Date of Birth Grade

The above named student(s) has enrolled in our school. Enrollment is conditional upon receipt of records indicating that no suspension/expulsion is in effect or pending. Please send us the records listed below, to the extent that they exist:

- \* Permanent record (cumulative to the present)
- \* Certificate of Immunization Status
- \* Tuberculosis Certificate
- \* Health Record Folder
- \* The last two Statement of Eligibility for Special Education
- \* The last three IEP's
- \* Behavioral records relating to suspension, expulsion or eligibility for special education.
- \* Other special program records (TAG, school lunch, Title I, etc.)
- \* A list of the types and location of education records maintained for students in your school and the title of the person responsible for those records.

Thank you for your prompt response.

\_\_\_\_\_  
Registrar

\_\_\_\_\_  
Date

SEND RECORDS TO: \_\_\_\_\_  
School

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

