



# Sequim School District No. 323

**"All Students Will Experience Success"**

503 North Sequim Avenue, Sequim, WA 98382  
Telephone: (360) 582-3260 FAX: (360) 683-6303

## REQUEST FOR TRANSFER OF STUDENT RECORDS

Releasing School or Agency: \_\_\_\_\_

Releasing School Address: \_\_\_\_\_

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

Telephone \_\_\_\_\_ FAX: \_\_\_\_\_

Student Name: \_\_\_\_\_ Birthdate \_\_\_\_\_ Current Grade \_\_\_\_ SSID# \_\_\_\_\_

Student Name: \_\_\_\_\_ Birthdate \_\_\_\_\_ Current Grade \_\_\_\_ SSID# \_\_\_\_\_

Student Name: \_\_\_\_\_ Birthdate \_\_\_\_\_ Current Grade \_\_\_\_ SSID# \_\_\_\_\_

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><u>Sequim High School</u></b> 601 N. Sequim Ave. Sequim, WA 98382 (360) 582-3613 (FAX) 360-582-9881	<b><u>Sequim Middle School</u></b> 301 W Hendrickson Rd Sequim, WA 98382 (360) 582-3500 (FAX) 360-582-9486	<b><u>Helen Haller Elementary</u></b> 350 W. Fir St. Sequim, WA 98382 360 582-3200 (FAX) 360-681-8543	<b><u>Greywolf Elementary</u></b> 171 Carlsborg Rd. Sequim, WA 98382 360 582-3300 (FAX) 360-582-9555
<input type="checkbox"/> <b><u>Sequim Alternative High School</u></b> 503 N. Sequim Ave. Sequim, WA 98382 (360) 582-3260 (FAX) 360-683-6303	<input type="checkbox"/> <b><u>Olympic Peninsula Academy</u></b> 220 W. Alder St. Sequim, WA 98382 (360) 582-3403 (FAX) 360-582-9229	<input type="checkbox"/> <b><u>Special Services</u></b> 503 N. Sequim Ave. Sequim, WA 98382 (360) 582-3400 (FAX) 360-683-0901	

### PLEASE EMAIL/FAX

- \_\_\_ **Unofficial Transcript**
- \_\_\_ **Discipline**
- \_\_\_ **Attendance**
- \_\_\_ **Immunization Record**
- \_\_\_ **Statement of any outstanding fines/fees**
- \_\_\_ **Other**

### PLEASE MAIL

- \_\_\_ **Official Transcript**
- \_\_\_ **Discipline & Attendance**
- \_\_\_ **Health Records** – All health information, original immunization record
- \_\_\_ **Special Services Assessment** – Includes psychological, speech, language, hearing, physical therapy, occupational therapy, audiological casework, medical, vocational, etc.
- \_\_\_ **Withdrawal Grades** – to date of leaving for work in progress
- \_\_\_ **Legal Information** – includes restraining orders, etc.
- \_\_\_ **Cumulative File** – Basic identification data, grades, standardized test scores, activities, awards, attendance, class standing, etc.

*Thank you very much for your prompt attention to this request for records, which will facilitate efficient programming for new students.*

I authorize the release of records to the Sequim School District.

1<sup>st</sup> Request: \_\_\_\_\_

2<sup>nd</sup> Request: \_\_\_\_\_

3<sup>rd</sup> Request: \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

Date \_\_\_\_\_

Records sent by: \_\_\_\_\_ Date \_\_\_\_\_