
RECORDS CENTER
Alexandria City Public Schools
Valerie Meyer
Phone (703) 706-4532 Fax (703) 836-1036

RECORDS REQUEST FORM
PLEASE PRINT CLEARLY

Full name of student _____
(as listed in school)

Current address _____

School last attended _____
(in Alexandria City School System)

Year last attended _____ Graduated: Yes _____ No _____

Date of Birth _____

Name of parent/guardian _____
(When enrolled in Alexandria City School System)

What do you need your records for? _____

Instructions:

_____ I will pick the records up. Call me when they are ready.

_____ Mail the records to _____

_____ Fax the records to _____

Signature _____

Email address _____

Daytime Phone Number _____

Today's Date _____