Valley Court/Community School Records Request

Notary Request

Requestor Information

Name _____

Contact Number ( ) _____

Relationship to Student _____

Student's Current Age _____

Student Information at Time of Enrollment

Name (if different) _____

Date of Birth _____

Last School Attended _____

Last Year Attended _____

Did student graduate from here? ☐ YES ☐ NO

RECORDS REQUESTED:

☐ Official Transcript ☐ Copy of Diploma ☐ Other - Please list: _____

SEND RECORDS BY:

☐ Mail

☐ Fax

NAME/AGENCY

ATTENTION TO

( ) PHONE NUMBER

STREET ADDRESS APT #

( ) FAX NUMBER

CITY STATE ZIP CODE

_____

SIGNATURE OF REQUESTOR DATE

(*DO NOT SIGN UNTIL IN PRESENCE OF NOTARY***)

Notarized Acknowledgment of Individual

State of _____ County of _____

This form was acknowledged before me this _____ by _____

Date Name of person acknowledged

NOTARY PUBLIC: [Notary Seal]

_____

Signature of Notary

_____

My commission expires:

Records will be released upon Administrator approval

MCOE Regulation 5125 – Within five business days following the date of request, a parent/guardian or other authorized person shall be granted access to inspect, review, and obtain copies of student records during regular school hours. (Education Code 49069)

FOR OFFICE USE ONLY

Signature of Receiving Staff Date

Name of Staff Releasing Records Date

Office notes: _____