



# Mercer Area School District



Mercer Area Elementary School  
301 Lamor Road • Mercer, PA 16137  
724-662-5102  
www.mercer.k12.pa.us

To: \_\_\_\_\_ Fax: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Start Date: \_\_\_\_\_

The above student is enrolling at Mercer Area School District.

» Please send all records and information available for this student to include:

- Permanent Record
- Health & Immunization Records
- Grades / Transcript / Test Scores
- Copy of Birth Certificate
- Career Readiness Portfolio
- Attendance & Discipline Records

Please send records and information to:

Sharilynn Jones  
Mercer Area Elementary School  
301 Lamor Road  
Mercer, PA 16137  
Fax: 724-662-5103  
Email: [sjones@mercerc.k12.pa.us](mailto:sjones@mercerc.k12.pa.us)

» If applicable, please send all Special Education Records to include:

- IEP
- Psychological
- ER / RE-EVAL / WAIVE
- Date of original permission to evaluate, etc.
- NOREP
- GIEP / GWR / NORA

Please send Special Education information to:

Renee Masson  
Mercer Area Elementary School  
301 Lamor Road  
Mercer, PA 16137  
Fax: 724-662-5103  
Email: [rmasson@mercerc.k12.pa.us](mailto:rmasson@mercerc.k12.pa.us)

I hereby authorize the release of my child's records and any appropriate information to Mercer Area School District. This information is to be used only for professional purposes and it will be treated in a confidential manner.

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

\_\_\_\_\_  
Date