Richards R-V School District

2025-2026 Enrollment Forms

Student Records Request

In accordance with State and Federal Law, this form authorizes the Richards R-V School District to request written and verbal information for the purpose of legitimate educational interests and planning for:

Name of Student: _____   DOB: _____

Address_____

Previous School Name: _____   Grade Last Attended: _____

_____   _____   _____
(parent/guardian signature)   Phone Number   Date

FOR OFFICE USE
MOSIS information for Missouri Schools
Date of request:_____Student will start when records have been received.
The following records are requested:
___   Cumulative school records including, but limited to:
___   MOSIS ID number _____
___   Standardized test
___   Health/Immunization Records
___   Attendance
___   Disciplinary Reports
___   Withdrawal Grades
___   Birth Certificate
___   Multi-Disciplinary Team Reports / Evaluation Reports (ER)
___   Individual Education Plan (IEP)
___   Section 504 Records and Plans
___   Psychological testing results
___   Speech/language/hearing results
___   Occupational therapy results
___   Physical therapy results
___   Other: _____

Records are requested from:

School:_____

Fax:_____

Records should be sent to:

Attn: Mrs. Bryant, School Counselor

Fax (417)256-3314

Email: tbryant@richardsschool.k12.mo.us