



*Weldon STEM High School Career Academies
415 County rd.
Weldon NC 27890*



Records Request Form

Date of Request: _____

Name of Previous School: _____

Phone # _____

Fax# _____

Please send school records of the following student who was previously enrolled in your school.

Name of Student:

D.O.B.:

Grade level:

Did your child receive services for Exceptional Children, i.e. 504, IEP, AIG?

Circle one YES or NO

Please send the following records:

*Immunization Record/Health Records

*Birth Certificate & SS card

*Record of Attendance

*Discipline records

*IEP/504, (if applicable)

*Official Transcript & Report Card for current or prior academic year

*Test scores

Parent/Guardian Signature

Relationship to student

****PLEASE FORWARD RECORDS TO _____
BY FAX (252) 536-0168 OR EMAIL _____**



*Weldon STEM High School Career Academies
415 County rd.
Weldon NC 27890*



Student Residency Affidavit

This affidavit is intended to address the requirements of the McKinney-Vento Act, Title X, Part C of the No Child Left Behind Act. The questions below are to assist in determining if the student meets the definition of homelessness.

1. Is your current address a temporary living arrangement?

_____ Yes _____ No

2. Is this temporary living arrangement due to loss of housing or economic housing?

_____ Yes _____ No

3. Is the student an unaccompanied youth or runaway?

_____ Yes _____ No

*****IF YOU ANSWERED NO TO BOTH QUESTIONS, YOU MAY STOP
HERE*****

***** IF YOU ANSWERED YES TO EITHER OF THE ABOVE QUESTIONS,
PLEASE ANSWER THE QUESTION BELOW AND COMPLETE THE
NEXT TWO SHEETS*****

Where does the student stay at night?

- Temporarily with more than one family in a house, mobile home, or apartment
- In a shelter
- In a motel
- In a car
- At a campsite
- Other location not appropriate for people (abandoned building)