



6901 E Bear Path, Prescott Valley, AZ 86314

REQUEST FOR STUDENT EDUCATIONAL RECORDS

1st Request _____ 2nd Request _____ 3rd Request _____

Student's Name _____

Date of Birth _____ Age _____ Grade Level _____

Name of Previous School _____

School Address _____ City, State, Zip _____

School Phone Number _____ Fax Number _____

Please send the following information: **(Please DO NOT send the cumulative folder)**

- Birth certificate, legal custody documentation
- Health/medical records
- General administrative data, attendance data
- Official transcript, report cards, test scores
- Withdrawal grades, formal withdrawal slip
- Discipline Records
- Arizona SAIS Number (if Applicable) _____

Fax, Email or Mail the above records to:

School: _____

Address: _____

Phone/Fax: _____

Email: _____

For SSO Office Use Only:

Previous School District _____

Student Services Phone Number _____ Fax Number _____

**IEPs, Evaluations, Special Education programs and records, 504s
or any other confidential information should be faxed or emailed to:**

The Humboldt Schools - Attn: Special Services Office

6901 E Bear Path, Prescott Valley, AZ 86314

Phone: (928) 759-4042

Fax: **(928) 759-4030**

Email: kristi.faust@humboldtunified.com

A.R.S. 15-828.F Notwithstanding any financial debt owed by the pupil, any school requested to forward a copy of a transferring pupil's record to the new school shall comply and forward the record within ten days after receipt of the request.

NOTE: According to the Final Regulations (Family Educational Rights and Privacy Act, Buckley Amendment, June 17 1976), it is no longer necessary to obtain written consent to release records between schools. School officials may receive student records without written consent from the parent, guardian, or student.