Richards R-V School District

2026-2027 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. Melissa Mitchell, Secretary

Fax (417)256-3314

Email: mmitchell@richardsschool.k12.mo.us

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