

# Copper River School District Student Record Request



Send Records to:

Upstream Learning; Copper River Home Education Program  
PO Box 108  
Glennallen, AK 99588

(907)-822-3234-ext.227 or 226; Fax: 907-822-3949; **USE THIS PAGE AS A COVER PAGE**

Date: \_\_\_\_\_

To: \_\_\_\_\_ (School Name)  
 \_\_\_\_\_ (School Address)  
 \_\_\_\_\_ (City, State, Zip)  
 \_\_\_\_\_ (Fax number)

**The following student(s) has requested enrollment into our program.  
 Records are needed as soon as possible to determine possible placement.**

**Please fax all records to the number above or email/scan to  
[lphillips@crsd.k12.ak.us](mailto:lphillips@crsd.k12.ak.us)**

Name of Student(s)	Date of Birth	Grade (enrolled in at last school)
_____	_____	_____
_____	_____	_____

Last attended your school \_\_\_\_\_

Please forward the following information:

- ✓ Complete transcript w/Grades to Date
- ✓ Health Card and Birth Certificate
- ✓ Test Scores
- ✓ Special Education Records

Please list the date of withdrawal from your school:

\_\_\_\_\_

We agree to observe appropriate confidentiality on all materials.

*Thank you,*

*Lanette Phillips, Administrative Assistant*

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A school district in which a student enrolls may request student records from a school the student last attended without a parent signature of approval. See A: Protection of the Rights and Privacy of Parents and Students@ Section 438 Subsection (B)(1), Parts A&B, Page 97 as amended in 1976.

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I understand that the information will be treated in a confidential manner and will not be transmitted to a third party.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date