

LOCKPORT SCHOOL DISTRICT 91
"Education is our connection to the future"

808 Adams Street
Lockport, IL 60441



OFFICIAL REQUEST FOR RECORDS

Date of Request: _____

Name of Previous School: _____

Address: _____

City/State/Zip: _____

How long did the student attend this previous school? _____
(If less than one school year, please complete an additional form for other schools)

Student Name: _____ **DOB:** _____

Grade: _____ Has the student ever attended an Illinois school? ___Yes ___No

Please send the cumulative record for this student so proper placement can be made and recordkeeping maintained. Please include the following records:

1. All Medical and Immunization Records
2. Custody/Legal Guardianship Papers (if applicable)
3. Present Grades
4. Attendance Record
5. Student's Cumulative file and Standardized Test Scores
6. ISBE Student Transfer Form(if transferring from an Illinois Public School)
7. Any Special Education Records, including most recent IEP, Psychological Evaluations, Social History, Educational Evaluations.

Thank you in advance for your prompt attention to this request.

Please mail all the above information to:

Student Data Specialist/Attendance Secretary
Student Records Department- Cynthia Dragosh
Lockport School District 91
808 Adams Street
Lockport, IL. 60441

Tel: (815)838-0737x1104

Fax: (815) 834-4339

Email: cdragosh@d91.net

This release does not waiver the right to challenge or review the contents of said records by the parents, guardian, or emancipated minor as prescribed by law.

Parent/Guardian Signature

Date