

**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 student attend this previous school? \_\_\_\_\_  
*(If less than one school year, please complete an additional form for other school)*

**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](mailto:cdragosh@d91.net)

This release does not waive 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