

Parents Request for Copies of Records

5100 Greenwell Springs Rd.

Baton Rouge, La. 70806

Telephone: (225) 231-9292 Fax: (225) 231-9291

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|----------------------------|------------------------------|
| _____ Birth Certificate | _____ Withdrawal Slips |
| _____ Immunization Records | _____ Last Report Card(s) |
| _____ Current Test Scores | _____ Magnet/Scholar Student |
| _____ Discipline Records | _____ IEP/IAP Plan |
| _____ Social Security Card | _____ 504 Plan |
| _____ Homeless Apply | _____ Student Data Sheets |
| _____ Attendance Records | |

There is a 24 hour per waiting period for all request to be filled: Please provide the following:

Student's Name: _____

Grade: _____

Parent/Guardian Name(s): _____

Phone Number: _____

Identification of Requestor: _____

Date of Request: _____