

## DAVIS HIGH SCHOOL

## **RECORDS REQUEST**

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

LAST SCHOOL ATTENDED: (If a junior high: list future high school)  Name of Last School:  Address of Last School:  City, State and Zip Code:							
				Registrar's E	mail (preferred)/Fax #	of Last School:	
						e student named below has enro d the academic records to the da	•
				Name:		Birthdate:	Current Grade:
Please inclu	de the following inforn	nation:					
	OFFICIAL TRANSCRIE	PT					
	☐ IMMUNIZATION REC	CORDS					
	☐ PERTINENT TEST SCO	DRES-COMPETENCY /EXIT TESTING					
	☐ WITHDRAWAL GRAI	DES AND DATE OF WITHDRAWAL					
	☐ BIRTH CERTIFICATE						
	☐ EXPLANATION OF G	RADING SYSTEM					
	☐ DISCIPLINE/SAFE SCHOOL INFORMATION						
	☐ SPECIAL EDUCATION	I RECORDS/ IEP					
Please forwa	ard all records to:	Davis High School Attn: Malia Roundy (Registrar) 325 South Main St. Kaysville, UT 84037 801-402-8821					

maroundy@dsdmail.net (preferred)

801-402-8813 (FAX)

<sup>\*</sup>The Federal Law 9931 allows for educational records to be sent to other educational agencies without the parent's signature requirement.