

STUDENT RECORDS REQUEST

Student's Name: _____ Academic Year _____

Please send the following records of the student named above:

- Progress Reports
- Medical / Health Records
- Attendance / SIMS Reports
- IEP's / Special Education Records
- National / State Standardized Test Scores
- Any additional confidential reports, i.e., evaluative material

To: Denise Kimble, Data Manager
Sterling Montessori Academy and Charter School
202 Treybrooke Drive
Morrisville, NC 27560

Requested from:

Name: _____

Address: _____

City, State, Zip _____

Parent / Legal Guardian's Signature

Date