



**Jersey Shore Area School District**  
175 A&P Drive, Jersey Shore, PA 17740

Form

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**Request for Pupil Records**

Date \_\_\_\_\_

Name of School \_\_\_\_\_

School Address \_\_\_\_\_

School Phone # \_\_\_\_\_ School Fax # \_\_\_\_\_

Date of Withdrawal from Previous School \_\_\_\_\_ Grade \_\_\_\_\_

Student's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

The student identified above has enrolled in our school on \_\_\_\_\_

We are requesting his/her:

- Cumulative Records, including current schedule, Future Ready PA Index Artifacts, grades, test scores, attendance and last date of attendance in your school.
- Discipline Log
- Health Record
- Current Individual Education Program, ReEvaluation Report, Notice of Recommended Educational Placement plus Initial Evaluation Report
- Psychological Reports
- Any information regarding special needs

\_\_\_\_\_  
Parent Signature, if available

\_\_\_\_\_  
Date

According to the Final Regulation—Family Education Rights and Privacy Act (FERPA), it is no longer necessary to obtain written consent to release school records to other school systems.