



CENTRALIA HIGH SCHOOL

813 Eshom Road Centralia, WA 98531
Phone: 360.330.7609 Fax: 360.330.7616

REQUEST FOR RECORDS

Request for Transfer of Educational Records

In accordance with Family Education Right and Privacy Act of 1974, it is mandatory that the student's records be sent to this school for inspection and review.

Former School Information:

Name of School _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____

This is to certify that I give permission to release the records of:

Students Name:

First _____ Middle _____ Last _____

Date of Birth _____

PLEASE FAX THE FOLLOWING TO 360.330.7616 ASAP:

- Unofficial Transcript Withdrawal Grades Immunizations IEP

Please send records to: **Centralia High School**
813 Eshom Road
Centralia, WA 98531

Please include health records, transcripts, portfolio, and SSID #. Dates of entrance and withdrawal, credits or grades earned, TEST scores and any other information would be appreciated.

Parent / Guardian Signature _____

Today's Date _____ Contact Number () _____

Registrar _____ Teresa Morley, Registrar

Email: teresamorley@centralia.wednet.edu