

# Glenwood Community School District



Ashley Salazar  
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Principal  
Assistant Principal  
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## Records Request: Preschool - 2<sup>nd</sup>

DATE: \_\_\_\_\_

TO: \_\_\_\_\_ Name of previous school

\_\_\_\_\_ City, State ZIP Code

\_\_\_\_\_ Phone

\_\_\_\_\_ Fax Number

For:

\_\_\_\_\_ Name of Student

\_\_\_\_\_ Birthdate

\_\_\_\_\_ Grade

For:

\_\_\_\_\_ Name of Student

\_\_\_\_\_ Birthdate

\_\_\_\_\_ Grade

DATE: \_\_\_\_\_

X \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN /SIGNATURE OF STUDENT IF OVER AGE 18

PLEASE INCLUDE:

- Birth Certificates
- Current Report Card
- Immunization Records
- IEP Information
- Title Services
- Social/Behavior, Emotional & Mental Health Status if Appropriate
- Speech Services
- Attendance
- Health Records/504 Plans
- Other \_\_\_\_\_

\_\_\_\_If you would like Income Eligibility Information for Free and Reduced Meals provided by the Glenwood Community School District.