

**PUBLIC SAFETY ACADEMY**  
**REQUEST TO TRANSFER PUPIL RECORDS**

To: \_\_\_\_\_  
Last School Attended

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

The student listed below has enrolled in our school.

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

Grade in Fall \_\_\_\_\_ Gender \_\_\_\_\_ Male \_\_\_\_\_ Female

I acknowledge notification that my child's school records are being requested from the named school and that I have a right to review, receive a copy of the records, and a right to challenge the content of the records (Ed Code 49068, C.A.C. Title V, Section 438).

\_\_\_\_\_  
Parent/Guardian/Adult Student Signature

.....  
(To be completed by school Personnel)

We are requesting the following records as they pertain to the student listed above

\* **Scholastic & Pupil Progress Data**

\* **Test Data**

\* **Health Data**

\* **Proficiency Test Results**

\* **Special Education Data**

\* **English Language Learner Data**

Please send records to:

School Name: \_\_\_\_\_

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Name of requesting Clerk/Secretary/Registrar