



Doss Elementary

Austin Independent School District
Online Records Request Form

Date of record request: _____

Student Name: _____ **Date of Birth:** _____

Name of last school attended: _____

Address: _____ **Phone**

number of former school: _____ **Contact email for person**

fulfilling request: _____ **Parent/Guardian signature:** _____

For Office Use only:

Above named student enrolled on _____ in _____

<input type="checkbox"/>	Kindergarten	<input type="checkbox"/>	1 st grade	<input type="checkbox"/>	2 nd grade	<input type="checkbox"/>	3 rd grade	<input type="checkbox"/>	4 th grade	<input type="checkbox"/>	5 th grade
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PLEASE SEND THE FOLLOWING:		IF APPLICABLE:	
	Original home language survey		Gifted and talented records
	Birth certificate		LPAC records/ scores (out of state equivalent)
	Immunization records		OLPT or other test scores
	Attendance records		Qualifying documentation for PK
	Withdrawal form		Special education / 504 records
	Report cards		State test and labels
	Discipline records		

According to Final Regulation – Family Rights and Privacy Act (Buckley Amendment) dated June 17, 1976. It is no longer necessary to obtain written consent to release records. It states that school officials of other schools in systems in which the student may intend to enroll, may receive a student's records without written consent for such release.

PLEASE EMAIL ALL RECORDS REQUESTED TO: patricia.lewis@austinisd.org