

ALLEGAN PUBLIC SCHOOLS

Request for Records

Date: _____

TO: _____ Attn: _____
Last School Attended School District Registrar/Records Manager

Email: _____ or FAX #: _____

FROM: *Patty*

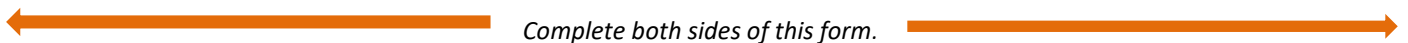
pbutcher@alleganps.org
269-673-7002 x 5525

The student listed below has enrolled at Allegan Public Schools. The parent or guardian has requested that all school records be forwarded to us. Please send all information and records that will help in providing the best educational planning and services possible (including grades, test scores, psychological/confidential reports, and any Special Education information).

STUDENT'S LAST NAME _____ FIRST NAME _____ MIDDLE INITIAL _____


GRADE _____ GENDER (circle one): MALE or FEMALE DATE OF BIRTH ____/____/____

Parent or Guardian Signature _____ Date _____



Office Use Only

Please scan/email the following information immediately:

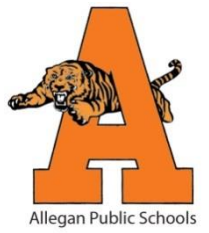
-  *pbutcher@alleganps.org*
- Transcript
- Current Grades/Drop Grades
- Birth Certificate
- Immunization Record
- Latest IEP/MET (if applicable)

Please mail
Cumulative file

Please mail records to:
Allegan High School
Attn: Counseling Office
1560 M-40 North
Allegan, MI 49010

Thank you

ALLEGAN PUBLIC SCHOOLS
Initial Enrollment Form – Allegan High School



STUDENT NAME _____ FIRST NAME _____ MIDDLE INITIAL _____

GRADE _____ GENDER: MALE or FEMALE DATE OF BIRTH ____/____/____

MAILING ADDRESS _____ CITY _____ ZIP _____

PARENT/GUARDIAN NAME _____

PRIMARY PHONE # _____

State law requires that parents or guardians enrolling their child in a school district must certify that the enrollee ***has not been expelled*** from any school or school district. If an individual has been expelled it would require a review by the Director of Instruction.

Last School Attended: _____

Last Date of Attendance: _____

I, _____ certify that my child
(Name of Parent/Guardian)

(Name of Student)

has not been expelled from any other school or school district.

PARENT SIGNATURE _____ DATE ____/____/____

← _____ Complete both sides of this form. _____ →