

LIVE OAK ELEMENTARY SCHOOL
Castaic Union School District
27715 Saddleridge Way
Castaic, CA 91384

Tel. (661) 257-4540

Fax (661) 257-6384

REQUEST FOR STUDENT RECORDS

TO: _____

CITY, STATE: _____ TEL: _____

FAX: _____

_____ Please send all records, including transcript, attendance, discipline, health and psychological for the following student/students who is/are now enrolled at our school.

_____ Please fax immunizations, birth certificate, IEP, Section 504 Plan now and send records later. Thank you.

Name: _____ Birthdate: _____ Gr. _____

Name: _____ Birthdate: _____ Gr. _____

Name: _____ Birthdate: _____ Gr. _____

In accordance with California Education Code Section 49068, pupil records are to be transferred no later than 10 school days following the date this request is received. This provision applies to both public and private schools.

Family Educational Rights & Privacy Act of 1974 (Buckley Amendment) states that a parent signature is not required for transfer of records between schools, with the exception of third party reports. A copy of the amendment may be obtained from the Department of Health, Education and Welfare, Room 3514, South Portal Building, 200 Independence Avenue S.W., Washington, D.C. 20201.

Signature: _____ Title: _____

Reciprocal Withholding of Records. If the above-named pupil left your school with a debt remaining for lost or damaged books or items and you have withheld grades, diplomas, transcripts from the parent/student we will reciprocally withhold these records on your request pursuant to EC §48904 *et seq.*, until this debt is settled. **Please note that these provisions apply to public and private schools but do not include PTA debts or private school tuition, which are matters for the small claims court.**

1 st Request	2 nd Request	3 rd Request
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