



310B Request for Transfer of Records TO the Newfoundland and Labrador English School District

(To be completed by a NLESD school to request transfer of records from a school in another province or country)

REQUEST TO THE SCHOOL PRINCIPAL:

School: _____

Address: _____

Name of Student: _____

Date of Birth: _____ / _____ / _____
Month Day Year

Last grade attended: _____ Last date attended: _____

THE ABOVE-NAMED STUDENT HAS REGISTERED AT OUR SCHOOL. With the consent of the parent/guardian as provided below, we respectfully request that you forward this student's complete student record, including any confidential file, to our school:

School: _____

Address: _____

Phone #: _____

I hereby authorize and direct that information concerning my child be released to the Newfoundland and Labrador English School District, to the school listed above. This information is to be provided for the purposes of registering my child at school and providing educational programming and services.

NAME OF PARENT/GUARDIAN (PLEASE PRINT)

SIGNATURE

DATE

NAME OF PRINCIPAL (PLEASE PRINT)

SIGNATURE

DATE

School/District office Use Only

Request sent by:

☐ Email

☐ Fax

☐ Other

RECEIVED: ☐ Cumulative file ☐ Confidential file ☐ Other _____