



3500 NE Prather Road
Kansas City Missouri, 64116
816-455-3513 ▲ 816-455-0982 Fax
www.fcaclassical.com

STUDENT RECORDS REQUEST FORM

Name: _____ Date of Birth: _____ Grade: _____

Previous School(s)

Most Recent School Attended

Any other School Attended

Address

Address

City, State and Zip

City, State and Zip

Phone#

Fax#

Phone#

Fax#

Please fax the following information to: (816) 455-0982 ATTN: Admissions

- _____ Withdrawal Form with transfer Grades
- _____ Immunization and Health Records
- _____ Birth Certificate
- _____ Official transcript with all Grades and Tests Results
- _____ Special Education records
- _____ IEP
- _____ Diagnostic Evaluation Report
- _____ 504 Plan
- _____ Discipline Records
- _____ Attendance Records

Parent Signature

Date

Home Phone

• According to the Missouri Safe School Act Section 167.020.7 RsMo., any school district receiving a request for records must respond within 5 business days of the receipt of request and must include discipline records. Violation of this subsection is a Class B misdemeanor.

• Federal Law 99.21 states, "No parent signature is required for education records sent to another educational agency."