

**EAST ALLEN COUNTY SCHOOLS
NOTICE OF STUDENT TRANSFER AND ENROLLMENT**

(Date)

STUDENT NAME: _____

BIRTHDATE: _____ **GRADE:** _____

PREVIOUS SCHOOL: _____

ADDRESS: _____

The above named student has enrolled in our school. Please send us the following information:

NAME OF FIRST SCHOOL ATTENDED IN INDIANA _____

_____ **TRANSCRIPT OF GRADES and CREDITS EARNED**

_____ **IMMUNIZATION-HEALTH RECORDS**

_____ **BIRTH CERTIFICATE**

_____ **TEST SCORES (ACHIEVEMENT OR COLLEGE ENTRANCE)**

_____ **ISTEP GRADUATION TEST RESULTS (INDIANA SCHOOLS ONLY)**

_____ **CURRENT IEP'S AND PSYCHOLOGICAL TESTING/ 504-IF APPLICABLE**

_____ **ATTENDANCE RECORDS**

_____ **PROGRESS GRADES TO DATE OF WITHDRAWAL**

_____ **PLEASE INDICATE IF STUDENT IS CURRENTLY SUSPENDED OR UNDER EXPULSION PROCEEDINGS.
(PLEASE SEND CURRENT DISCIPLINE/EXPULSION FILES)**

_____ **END OF COURSE ASSESSMENT-ALGEBRA – ENGLISH 10**

_____ ***ORIGINAL* HOME LANGUAGE SURVEY**

_____ **ENGLISH LANGUAGE PROFICIENCY TEST RESULTS -ESL SERVICES
RECORDS**

_____ **HIGH ABILITY RECORDS**

_____ **BEHAVIOR INTERVENTION PLAN/FUNCTIONAL BEHAVIOR ASSESSMENT/RTI**

_____ **OTHER** _____

_____ **ALL THE ABOVE**

PLEASE SEND RECORDS TO:

**GUIDANCE REGISTRAR
(SCHOOL NAME)
(NUMERICAL ADDRESS)
(CITY, STATE, ZIP)
(PHONE and FAX #)**

Federal Law 99.31-"No parent signature required for educational records sent to another educational agency."

Thank you for your cooperation in this matter.

Date: _____ Parent Signature _____