



Meade School District 46-1, 1230 Douglas Street, Sturgis, SD 57785, (605)347-2523

Please send records to: \_\_\_\_\_

**REQUEST FOR TRANSFER OF EDUCATIONAL RECORDS BETWEEN SCHOOLS**

Last School Attended: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**RECORDS REQUESTED:**

- |  |  |
|--|--|
| <input type="checkbox"/> Birth Certificate         | <input type="checkbox"/> Immunization Records  |
| <input type="checkbox"/> Special Education Testing | <input type="checkbox"/> IEP                   |
| <input type="checkbox"/> Transcript of Grades      | <input type="checkbox"/> Psychological Testing |
| <input type="checkbox"/> Other _____               |  |

_____	_____	_____
Student's Name	Grade	Sims ID Number

_____	_____	_____
Student's Name	Grade	Sims ID Number

_____	_____	_____
Student's Name	Grade	Sims ID Number

_____	_____
Parent Signature	Date

Enrolled at your school until: \_\_\_\_\_