



West Carrollton Schools

Student Enrollment

Records Release



Parents: Please complete the top half of this form as part of your child's enrollment packet. Thank you.

Student: _____ Grade: _____ Date of Birth: _____

Previous School Name and Address _____
(Include phone and/or fax number if _____
possible): _____

I hereby authorize the transfer of all school records for the above named student, to be released to (please check one):

West Carrollton Senior High
5833 Student Street
West Carrollton, OH 45449
Phone: 937.859.5121 ext 8809
Fax: 937.859-2774

CF Holliday Elementary
4100 S. Dixie Drive
Dayton, OH 45439
Phone: 937.859.5121 ext 3300
Fax: 937.643-5460

Harold Schnell Elementary
5995 Student Street
West Carrollton, OH 45449
Phone: 937.859.5121 ext 6600
Fax: 937.859-2775

West Carrollton Middle School
424 E. Main Street
West Carrollton, OH 45449
Phone: 937.859.5121 ext 7709
Fax: 937.859.2780

Frank Nicholas Elementary
3846 Vance Road
Dayton, OH 45439
Phone: 937.859.5121 ext 2200
Fax: 937.859.2765

Harry Russell Elementary
123 Elementary Drive
West Carrollton, OH 45449
Phone: 937.859.5121 ext 5500
Fax: 937.865-5720

RECORDS TO BE RELEASED:

Grades (up to withdrawal date)
Health Records/Immunizations
State and standardized test scores
SSID Number

IEP/ETR/504 plan
Permission to test
Credits
Any other records

PARENT/GUARDIAN SIGNATURE

DATE:

WC Office Use Only

WC Office Use Only

WC Office Use Only

WC Office Use

Student's Enrollment Status (circle one):

ACTIVE

HOLDING

Enrollment packet completed at Central Office on: _____

Initials: _____

Records Release faxed/mailed to previous school on: _____

Initials: _____

Enrollment packet received at HS or MS on: _____

Initials: _____

Transcripts received from previous school on: _____

Initials: _____

OFFICIAL DATE FOR ACTIVE STUDENT STATUS: _____