



# Lewis County Adventist School

2104 S. Scheuber Rd, Chehalis, WA 98532



## Request for TRANSFER of EDUCATIONAL RECORDS BETWEEN SCHOOLS

To:

SCHOOL: \_\_\_\_\_

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

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

From:

**LEWIS COUNTY ADVENTIST SCHOOL**

2104 S. Scheuber Road  
Chehalis, WA 98532

(360) 748-3213

Re:

Student Name \_\_\_\_\_

Birthdate: \_\_\_\_\_ Grade \_\_\_\_\_

Date \_\_\_\_\_

In compliance with the Family Education Rights and Privacy Act of 1974, it is mandatory that written consent from the student's parents, or the adult student, be obtained in order to release school records.

**I acknowledge notification of this transfer of records**

Parent or Adult Student Signature \_\_\_\_\_

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

\_\_\_\_\_

Date: