



1615 Belton Garden City, Michigan 48135

734-261-0500

734-956-6360 Fax

Principal Suzanne March

## REQUEST FOR RECORDS

### STUDENT INFORMATION

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Male  Female

### School Releasing Information

School Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

School Phone Number: (\_\_\_\_) \_\_\_\_\_ Fax: \_\_\_\_\_

### Records Requested

CA-60 with all records/grades, etc. including but not limited to IEP's Immunization Records, etc.

### SCHOOL TRANSFER WEAPONS FREE SCHOOL ZONE STATEMENT

The above student is currently enrolled at Tipton Academy. In order to comply with Public Act 328, please verify that he/she has not been suspended or expelled from school for a weapons violation subsequent to January 1, 1999. If the above has been suspended or expelled due to weapons violations, please attach an explanation as to the current status of the student.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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