



Information Services - Sequoia Union High School District REQUEST FOR STUDENT INFORMATION

Please print all information clearly and completely. Incomplete requests will not be processed.

REQUESTING AGENCY INFORMATION		
Requesting Agency:		
Street Address (No PO Boxes):		
City:	State:	Zip Code:
Name of Requesting Individual (Last, First):		Badge# (If Applicable):
Telephone#:	Facsimile#:	
Type of Agency:	<input type="checkbox"/> Courts/Probation <input type="checkbox"/> Government - Other <input type="checkbox"/> Public School <input type="checkbox"/> Private School <input type="checkbox"/> Police Dept. <input type="checkbox"/> Federal Agency <input type="checkbox"/> Child Welfare <input type="checkbox"/> Other - Please Specify:	
Information will be received via:	<input type="checkbox"/> Facsimile (number specified above) <input type="checkbox"/> Picked up by requestor from the school site - Be prepared to show both personal and agency identification <input type="checkbox"/> US Mail (address specified above)	

STUDENT IDENTIFICATION	
Student ID# (if known):	Student Name (Last, First):
DOB:	Student's City of Residence (if known):
SUHSD School of Current/Last Enrollment (if known):	<input type="checkbox"/> 001 - Sequoia <input type="checkbox"/> 002 - Menlo-Atherton <input type="checkbox"/> 003 - Carmont <input type="checkbox"/> 004 - Woodside <input type="checkbox"/> 010 - Redwood <input type="checkbox"/> 000 - Unknown
Student Ethnicity (if known):	<input type="checkbox"/> 1 - American Indian/Alaska Native <input type="checkbox"/> 2 - Asian <input type="checkbox"/> 3 - Pacific Islander <input type="checkbox"/> 4 - Filipino <input type="checkbox"/> 5 - Hispanic/Latino <input type="checkbox"/> 6 - African American <input type="checkbox"/> 7 - White (not of Hispanic Origin) <input type="checkbox"/> 8 - Other

INFORMATION DESIRED	
Document(s) Requested:	<input type="checkbox"/> ATP13 - Student Attendance <input type="checkbox"/> DIS01 - Student Discipline Report <input type="checkbox"/> CHS12 - Student Transcript (Grades) <input type="checkbox"/> Other (specify):
Specific Purpose of Request:	<input type="checkbox"/> EC 49076(a)(9) - To conduct a criminal investigation or an investigation in regards to declaring a person a ward of the court or involving a violation of a condition of probation <input type="checkbox"/> Other (specify):
Authorizing Education Code Section(s) in the state of California or other legal provisions (federal or state): <input type="checkbox"/> EC 49076(a)(9) <input type="checkbox"/> Other (specify):	

Under penalty of perjury I declare that I have examined this request and accompanying statements, and to the best of my knowledge and belief, they are true, correct, and complete. I understand that the unauthorized re-release of this information and allowing unauthorized persons or organizations to access this information could subject me to criminal and/or civil penalties.

SIGN HERE

SIGNATURE OF REQUESTOR

PRINT NAME

DATE

DO NOT WRITE BELOW THIS LINE - FOR DISTRICT/SCHOOL USE ONLY	
Processed by (Last, First):	Date Processed:
Site: <input type="checkbox"/> 001 - Sequoia <input type="checkbox"/> 002 - Menlo-Atherton <input type="checkbox"/> 003 - Carmont <input type="checkbox"/> 004 - Woodside <input type="checkbox"/> 010 - Redwood <input type="checkbox"/> District Office	
Status: <input type="checkbox"/> Completed - Information Returned <input type="checkbox"/> Rejected - Incomplete <input type="checkbox"/> Rejected - Other (specify)	