

**CARBON COUNTY  
SUPERINTENDENT OF SCHOOLS**

**RECORD REQUEST FORM**

DATE: \_\_\_\_\_

TO: \_\_\_\_\_  
School District

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

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

PLEASE FORWARD MY CHILD'S PERMANENET RECORDS TO:

CARBON COUNTY SUPERINTENDENT OF SCHOOLS  
P.O. BOX 116  
RED LODGE, MONTANA 59068

CHILDS NAME \_\_\_\_\_

GRADE \_\_\_\_\_

BUILDING \_\_\_\_\_

REASON FOR TRANSFER: HOME SCHOOL

I AUTHORIZE THE RELEASE OF THE ABOVE NAMED STUDENT'S PERMANENET RECORDS AND WAIVE THE RIGHT TO REVIEW THE RECORD PRIOR TO TRANSFER TO THE COUNTY SUPERINTENDENT.

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_