

Martin Payne, *Superintendent*
Cathy Costello, *Principal*
Tim Damery, *Dean of Students*

Metamora Community Consolidated School District No. 1

BOARD OF EDUCATION

Robert Fisher, President
Greg Edwards, Vice President
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Bill Blundell
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Joe Straun
Pat Ward

815 East Chatham Street
Tel. (309) 367-2361

Metamora, IL 61548
Fax (309) 367-2364

Website: <http://mgs.metamora.k12.il.us>

REQUEST FOR RECORDS

To: _____ Fax: _____
(Name of School)

Please send a transcript of grades, test scores, health records, copy of birth certificate, all psychological and social/emotional information, RTI, 504, any additional services provided and special education records on the following student(s):

<u>STUDENT (S) NAME</u>	<u>GRADE</u>
_____	_____
_____	_____
_____	_____

Please forward all information to:

Metamora Community Consolidated Grade School District No. 1
Attn: Records
815 East Chatham Street
Metamora, IL 61548
Fax: 309-367-2364

Thank You.

X _____
(Parent's Signature)

Date: _____