

SHEPHERD PUBLIC SCHOOLS
District 37
7842 Shepherd Road – P.O. Box 8
Shepherd, Montana 59079

REQUEST FOR STUDENT TRANSCRIPT AND CUMULATIVE RECORDS

Previous School Attended: _____

Dear Principal:
 The following student (s) have enrolled at Shepherd Elementary School.

Name	Grade	Date of Birth

Please release the records checked and forward to:

Principal	Cumulative File	_____
Shepherd Elementary School	Student Health File	_____
7842 Shepherd Road	Psychological Records	_____
P.O. Box 8	Resource Room Records	_____
Shepherd, MT 59079	Other (Specify)	_____

 Signature of Parent or Guardian

 Date

 Signature of School Official