



NORTH VALLEY CHRISTIAN SCHOOL

Request for Records

In accordance with the Family Educational Rights and Privacy act of 1974 and California State Law Section 49068 of the Education Code, please send the following records and include the original California School Immunization Record (blue card).

Name: _____ DOB: _____ Grade: _____

Previous School: _____

Name of School

Address

City

State

Zip

Parent Signature: _____ Date: _____

Please mail and fax copies of the following records:

- Transcript
- Most recent report card
- Health & immunization records
- Testing and assessment information, including IEP, if applicable

Send to:

NORTH VALLEY CHRISTIAN SCHOOL

Admissions

8854 Haskell Ave

North Hills, CA 91343

Phone: 818.894.3213

Fax: 818.893.8074

Requested by:

Signature: _____ Date: _____

Title: _____