



**Pleasant Valley
Community
School District**

TRANSFER OF STUDENT RECORDS

Please return a copy of this form with the information requested. Pleasant Valley encourages sending requested documents electronically to: hodginjeanne@pleasval.k12.ia.us.

To:
School: _____

Address: _____

Phone: _____

City: _____ State: ____ Zip Code: _____

Fax: _____

The following student(s) have enrolled in Pleasant View Elementary School:

Student: _____ Grade: _____ Birth Date: _____

Student: _____ Grade: _____ Birth Date: _____

Student: _____ Grade: _____ Birth Date: _____

Student: _____ Grade: _____ Birth Date: _____

Please forward the following information:

Registrar contact's email address: _____

1. Cumulative records (grades, test scores, attendance records, discipline records)
2. Health and immunization records
3. If applicable, forward all Special Education records, current IEP, social worker report, and psychological report.

Please send records to:

Pleasant View Elementary School
6333 Crow Creek Rd
Bettendorf, IA 52722
Phone: (563) 332-5575
Fax: (563) 332-0223

To electronically send files, please email:
hodginjeanne@pleasval.k12.ia.us

Office Use Only:

Date Requested: _____

Date Received: _____