



**Magnolia School District  
District Registrar's Office  
1400 High School Drive  
Magnolia, AR 71753**

**Phone (870) 901-2513**

**FAX (870) 626-3222**

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Present Grade: \_\_\_\_\_

**RELEASING SCHOOL INFORMATION:**

Name of School: \_\_\_\_\_

City/State: \_\_\_\_\_

School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_



**Please send the following items to Jill White at [Jill.White@MagnoliaSchools.net](mailto:Jill.White@MagnoliaSchools.net) :**

- |                                    |                                    |
|------------------------------------|------------------------------------|
| _____ Transcript of Credits        | _____ Attendance Records           |
| _____ Withdrawal Grades            | _____ Test Scores                  |
| _____ Health Records               | _____ Psychological Evaluation     |
| _____ Copy of Birth Certificate    | _____ Individual Educational Plans |
| _____ Copy of Social Security Card | _____ Discipline Records           |

Parent/Guardian consent for release of above named student's educational records.

\_\_\_\_\_  
Parent/Guardian Signature Date

***Where all belong, all learn, and all succeed!***