



WAYNE LOCAL SCHOOL DISTRICT
WAYNESVILLE . OHIO . 45068
659 Dayton Road

CONSENT TO REQUEST RECORDS: IRN: 050468

Waynesville Elementary School
 Attn: Carissa Clawson
 p.513.897.2761 f.513.897.3938
 Email: cclawson@wayne-local.com

Waynesville Middle School
 Attn: Janine Brown
 p.513.897.4706 f.513.897.2083
 Email: jbrown@wayne-local.com

Waynesville High School
 Attn: Sharon Vogel
 p.513.897.2776 f.513.897-2083
 Email: svogel@wayne-local.com

IMPORTANT: This form must be filled out completely for admittance into Wayne Local School District. Our office will send this form to the student's former school following admission into Wayne Local School District. Do not submit this form directly to your school.

Scan and email is preferred method of delivery.

Student Information

Student's Full Name: _____

Current Grade: _____ Anticipated Start Date: _____

Date of Birth: _____ Home Phone: _____ Cell Phone: _____

Student's Legal Address: _____
Street Address

City State Zip School District

Last School Attended

Name of School: _____

School's Address: _____

School's Phone: _____ School's Fax: _____

Does student receive Special Education Services YES NO

- PLEASE SUBMIT THE FOLLOWING:**
- Official Transcript
 - Standardized Test Scores
 - Immunization Records
 - Birth Certificate
 - Copy of last report card
 - Custody Documentation (if applicable)
 - Special Education Records (if applicable) Including IEP,ETR, or 504 plan and any report period psychological reports, evaluation reports, etc.
 - SSID Number reported to the State
 - Disciplinary records (including weapons violations)

Sign and Date Below

Name of Parent or Legal Guardian: _____

PLEASE PRINT

Parent/Guardian's Signature: _____ Date: _____