West Boundary Elementary School

4035 South. Kettle Valley Rd. Rock Creek, BC, V0H 1Y0 PH # 250-446-2724

Parent Signature



Π π 250-440-2/24			Learning the Wild Way	
Date:				
STUDENT FILE TRANSFER REQU	EST			
The student(s) listed below has/haincluding the PSR, file folder, repor				ls
NAME	DO	В	GRADE	
Please withdraw this student from enrolled in. Please forward student information pertaining to this stude these student, please contact us. Thank you,	t records, perr	manent reco	ord card, and any other	
PARENTAL CONSENT: In accordance with the Freedom of Information and Protection of Privacy Act, School District No. 51 (Boundary) requires consent to use personal information for purposes related to educational programs. For this purpose, we request parental consent for the following: Student Records: I hereby authorize and give permission for the release of the complete student file, including any testing and psychological assessments that may be present and ask they be forwarded to: Greenwood Elementary School, SD #51 (Boundary)				
Parent/Guardian Name (please p	rint)	Date		