



Mother Lode Christian School

18393 Gardner Ave

Tuolumne, Ca 95379

Phone 209-928-4126 / Fax 209-928-4613

www.mymcls.com

REQUEST FOR RECORDS

Date _____

Pupil's Name

Birth date

Grade

The child listed above has been withdrawn from your school and is now enrolled in Mother Lode Christian School. Please release his/her academic and health records. Please include any information regarding Special Education placement if applicable.

Thank you.

School Last Attended

Mailing Address

City, State, Zip

Phone Number

Fax Number

IF YOU HAVE ANY QUESTIONS OR THESE RECORDS CANNOT BE SENT FOR ANY REASON, PLEASE PHONE THE SCHOOL AS SOON AS POSSIBLE. (209-928-4126)

Thank you

Office use only:

Date Mailed: _____

Date Received: _____

Date Faxed: _____