



Request to Transfer Student Records

The following student(s) is (are) now enrolled at Holy Spirit Catholic School.

STUDENT _____ GRADE _____

STUDENT _____ GRADE _____

STUDENT _____ GRADE _____

Please release the following records: health records, report cards, test results, IEP's, and any other pertinent information.

Previous School: _____

Address: _____

Phone: _____ Fax: _____

Please send records to:
Holy Spirit Catholic School
540 N. 7th Ave.
Pocatello, ID
83201

Thank you for your prompt attention in this matter.

Sincerely,

Karianne Earnest, Principal

Where Children Dream, Believe and Achieve